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ABSTRACT

Operation TACT (Toward an Allied Health Career Today), conducted in Hartford, Connecticut, was a cooperatively planned program integrating allied health education into the secondary level curriculum and offering educational opportunities to minority and disadvantaged students. The evaluation report opens with a historical summary of the project, a brief description of the program, and a statement of project goals. A 34-page section presents data and discussion on the effectiveness of TACT in the following areas: types of students served, field trips and work experiences, employment opportunities in the Hartford area, and student and teacher opinions of the program. The program was considered to be successful in meeting its objectives, and recommendations for its continuance are given. A 63-page section contains appended materials, including lists of full-time staff, student assignments, Health Career Day participants, and executive board and advisory council members; a detailed catalog of suggestions for local field trips, including recommended grade levels, educational objectives, health occupations or general area emphasized and a description of the institution to be visited; and descriptions of four participating hospitals. The 12-page final report outlines project methodology, emphasizing its consortium nature, and touches on projects involvement with State and local agencies, future development, and effects. (EC)

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FINAL EVALUATION REPORT AND FINAL REPORT

OF

TOWARD AN ALLIED HEALTH CAREER TODAY
(Operation TACT)

Contract No. NO1-AH-24242

School of Allied Health Professions
The University of Connecticut

CE007160

Notes for the Reviewer

Outline for scope of work according to contract number NO1-AH-24242, which indicates corresponding page numbers of final reports (specified in Article I, Section 3).

Item		Page No.
1.	Detailed explanation of methodology employed throughout the three years of the contract to accomplish the work objectives specified in the contract including this modification. Problems encountered and solutions adopted.	3-8 111
2.	Itemization of all personnel paid from the contract and a description of their functions in relation to the work objectives.	112-115
3.	Description of additional personnel services utilized to benefit the project which were not paid for by the contract.	116-118
4.	A copy of the curriculum (not course descriptions), grades 7 through 12.	Previously submitted
5.	Copies of all agreements negotiated as part of this contract between educational institutions and with clinical facilities.	119
6.	Listing and description of field trips for students grades 7 through 12.	49
7.	Description of involvement with state and local agencies and organizations related to the work objectives.	118, 119
8.	An outline of steps to be followed, persons who need to be involved, negotiations which need to be accomplished, state and local involvement required, etc., to enable other communities to implement a similar program. Include a time schedule and cost factors involved.	123

FINAL EVALUATION REPORT

OF

TOWARD AN ALLIED HEALTH CAREER TODAY
(Operation TACT)

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Contract No. NO1-AH-24242

School of Allied Health Professions
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FOREWORD FOR OPERATION TACT REPORT

Operation Toward an Allied Health Career Today (TACT), was cooperatively planned in 1971 by an interdisciplinary group of individuals representative of all levels of education in the Greater Hartford area. These committed individuals fully believed and accepted the premise that in order to attain credentials in the diverse discipline of health and to realize skill and competency as a health practitioner, that the basic building block didactic and practicum exposure and involvement at the earliest possible point of readiness was critical to ultimately achieving a desired goal within the health professions. Further, in a most rational and practical way, it was realized that a sound realistic scientific base was a key factor in creating options from which to choose. Therefore, individuals with creative talents from the public school system, vocational education (State Department of Education), community colleges, consumers, health practitioners and representatives from the University of Connecticut at the undergraduate and graduate levels joined hands to plan a curricular design capable of bearing fruit in the form of a more comprehensive and wholesome cadre of students "turned on" and fully prepared and ready to take advantage of studies leading to careers in the health professions.

To paraphrase the late Dr. Martin Luther King, Jr., no man or woman has learned to live until he or she can rise above the narrow confines of his or her individualistic concerns to the broader concerns of all humanity. It was always uppermost in the minds of the planners of the Operation TACT program that the full realization and fulfillment of helping and sharing for the benefit of human well-being could readily be accomplished by literally hundreds of individuals by the intrigue of exposure to the myriad of health professions directly linked to human beings and the opportunity to enhance their physical, psychological and social well-being. For to accomplish such a dream would have,

in part, fulfilled the aforementioned dream of Dr. King and thousands of others who believe and are committed to human decency.

The success of Operation TACT has been inextricably tied to many educators and practitioners who at times faced inordinate barriers to the development of the program. Even though it is difficult to single out an individual for high praise and commendation, in the case of Operation TACT this is not the case, for without the intestinal fortitude, professional competence and political social awareness of the Director of the Program, Mrs. Patricia A. Madison, Operation TACT surely would not have realized its first graduating class of budding health professionals during the spring of 1975. Also, we would not have had the opportunity to pridefully realize the implementation of a summer scientific enrichment and readiness program at the University of Connecticut for high school graduates prior to entering the first year of their baccalaureate program in a health field of their choice.

Needless to say, all of the individuals who have been associated with the Operation TACT Program are to be highly commended for their creative efforts and, at the same time, I am sure that each of the aforementioned individuals has been personally enriched and rewarded far beyond the capability of a financial subsidy to engender.

As a reflection on the aforementioned statements, it is my considered opinion that the worth of the Operation TACT Program is such that we can ill-afford to allow it to cease because of the lack of federal, state or institutional funds. We must therefore "keep it alive in '75", in order that we can allow the program to bear the fruit that it is capable of due to its continued refinement and phasic development to a workable and quality based educational process so badly needed by so many in this day and time.

Under the capable leadership of Dr. Carol Carter, the future for Operation TACT looms as a creative, successful and impactful one which the students in the

Greater Hartford area at all levels can ill-afford not to have as an option. Therefore, we must bring our total energies to bear on finding the resources necessary to maintain, continue and escalate the potential that the Operation TACT Program has demonstrated. To this end, we collectively join hands to accomplish such a mission.

Frederick G. Adams

FINAL EVALUATION REPORT
OF
TOWARDS AN ALLIED HEALTH CAREER TODAY (Operation TACT)

(School of Allied Health--University of Connecticut)

Introduction

Sensing the need and wishing to provide expanded services to the people of the State and elsewhere, the University of Connecticut through the efforts of Dr. Frederick G. Adams and others with a similar vision decided to create a School of Allied Health. This School of Allied Health would be designed to provide the State of Connecticut with a structure which would not only develop entry occupations for disadvantaged persons usually outside the job market, but would set an example of how education for the typical terminal as well as college-bound student could be improved. Further, it would bring to a specific employment area, the health field, a reservoir of productive persons.

To serve the disadvantaged; equalize and improve educational opportunities for the deprived; and bring a new productive resource to the labor market was the vision of the creators of Operation TACT at the University of Connecticut. What better way could the community be served by an institution of higher education? With this vision, Operation TACT as a part of the School of Allied Health at the University of Connecticut became a reality when a grant was provided by the Division of Associated Health Provisions (DAHP), Bureau of Health and Manpower, Health Resources Administration; formerly, DAHP was Division of Allied Health Manpower, National Institute of Health, (NIH). Now, after three

years of grants to Operation TACT, it is necessary to complete an evaluation procedure to determine the effectiveness of this venture. Consequently, it is the purpose of this evaluation report to provide appropriate information and pertinent data to indicate the degree to which the goals or objectives of the School of Allied Health at the University of Connecticut and its program Operation TACT were realized.

Historical Summary of the Project

On June 22, 1972, the Bureau of Health Manpower Education of the National Institute of Health awarded a contract to Operation TACT to develop a broad-based educational consortium with an emphasis on recruiting minority and disadvantaged students. Participating with the University of Connecticut in the development and implementation of Operation TACT were:

1. The Greater Hartford Community College
2. The Hartford Public Schools
3. The Manchester Community College
4. The Urban League of Greater Hartford

With the above organizations and institutions involved in the development of the project, a wide range of resources in the form of facilities, programs and expertise were made available to the TACT project and its staff. These included:

A. Greater Hartford Community College

1. Programs preparing medical secretaries.
2. Plans to train medical laboratory technicians and medical records technicians.

B. Hartford School System

1. Nurse's aide program for high school students.
2. Pilot program which explored the "world of work" on the junior high school level. Health was one of four general areas to be explored.
3. Plans to develop a program kindergarten through 12 which would investigate, explore and evaluate the world of work.
4. Plans for development of a program in which successful members of the Black community would provide opportunities for students to spend a designated period of time in work situations observing and participating with their sponsors.

C. Manchester Community College

1. Programs in the allied health field at the associate degree level.
2. New Careers program and a remedial program directed at minority students.
3. Program to coordinate allied health training with cooperating institutions.

D. University of Connecticut

1. Tentative School of Allied Health Professions which included three existing programs (medical technology, dietetics, and physical therapy) and future plans for additional programs.
2. School of Education with an audiovisual center, curriculum library, as well as an educational resource and development center.
3. Continuing Education Center
4. University Education Center
5. Division of University Libraries

E. Urban League of Greater Hartford

1. Project Matthew which provides counselling, guidance, tutorial, and remedial resources for school dropouts.
2. Network of resources of the Urban League for identifying, recruiting, and counselling minority students.
3. Church academy program which was a project to provide people with job skills in business. It had a day care center component for mothers enrolled in the program.

During the first planning year of Operation TACT, emphasis was placed in several areas. These included:

1. The development and implementation of a needs analysis study to cover both job markets and educational training programs within the allied health area of the State of Connecticut.

2. The development of an allied health orientation program and curriculum to integrate into the Hartford Public School System.

3. The development and implementation of an allied health counselling program that encompassed all of the participating institutions and organizations.

To accomplish the above tasks with as broad participation as possible, Operation TACT created an Executive Board and Advisory Council. Persons serving on this board and council represented cooperating institutions, community agencies and parents from the target areas. With specific tasks to be completed, the members of the Executive Board and Advisory Council were given an additional assignment of participating on one of four working committees. These committees were: 1) Curriculum, 2) Counselling, 3) Staff Training, and 4) Program Implementation and Development. In addition to Executive Board and Advisory Council members, other appropriate persons with specific resources

were recruited to participate as supplemental members of these four working committees.

Once an operational structure was developed, it was possible to devote attention to the creation of a final consortium of cooperating agencies and institutions to implement the educational ideas of TACT as well as complete the planning steps identified as being important to accomplish during the 1972-73 school year. At this point it was formalized that the consortium of agencies or institutions comprising Operation TACT would be: 1) The School of Allied Health of the University of Connecticut, 2) The Urban League of Greater Hartford, 3) The Manchester Community College, 4) The Greater Hartford Community College, and 5) The Hartford Public School System. Once established, this consortium continued to serve Operation TACT through its planning, implementation, and evaluation stages.

The specific steps employed during 1972-73 to accomplish the planning tasks for Operation TACT were:

Step I--The development of a paid, full-time staff for Operation TACT (See Appendix A);

Step II--The identification of a consortium of cooperating agencies or institutions to achieve the goals of Operation TACT (See above);

Step III--The development of an Executive Board to assist in making policy decisions for Operation TACT;

Step IV--The development of an Advisory Council to secure broad resources for the planning and implementation of Operation TACT;

Step V--The creation of four working committees in the areas of curriculum, counselling, staff training, and program implementation;

Step VI--The orientation of agency representatives, community persons, school staffs, and resource persons to the concepts and purposes of Operation TACT;

Step VII--The development of initial educational and counselling structures for the implementation of Operation TACT;

Step VIII--The training of specific teachers and related school staff to introduce Operation TACT educational concepts into two pilot schools of the Hartford System (Quirk Middle and Hartford Public High School).

During the 1973-74 school year, Operation TACT was introduced into the instructional programs of the pilot schools of Quirk Middle (Grades 7 and 8) and Hartford Public High (Grades 9-12). To provide needed experiential information, the curriculum developed for allied health training was field tested and successes as well as unforeseen problems were identified. A total of 387 pupils were involved in the educational program conducted during this pilot year.

In 1974-75, the Fox Middle School, Bulkeley High School, and Weaver High School were added to the program, and a total of 1373 students were served during this period.

It is worth noting at this point that at the end of the 1974-75 school year, the grants for the program will be discontinued and Operation TACT as of June, 1975 will no longer be supported by NIH funds. At this point, the school system of Hartford and the cooperating agencies will have had the opportunity to observe and experience the success of allied health education. It now becomes their discreet responsibility to continue or discontinue the program.

Description of the Program

In the simplest terms, Operation TACT is an educational program which begins in the 7th grade as a program of career exploration and ends in the 12th grade with on-the-job training as well as clinical experiences for selected target students. In the 8th grade, students continue to learn and study about allied health professions and begin in the 9th grade to get exposure to selected health occupations. Specific training in the health professions

commences in the 10th grade and continues into the 11th grade where concentrated skills development in a single health occupation is accomplished. This includes work and other types of "hands on" experiences designed to develop target students with sufficient skills to perform designated jobs on a learner's basis.

It is worthwhile to point out that a basic educational premise of Operation TACT deals with the use of allied health instruction to teach other related content areas. In the 7th and 8th grades, allied health concepts were used as a learning base for the subject matter areas of language arts, social studies, science, and mathematics. Thus, the study of allied health professions becomes a "learning core" for the involved students around which their total education is placed into an integrated relationship. At the high school level in grades 9 through 12, science courses were used as the vehicle providing for instruction in the allied health occupations. To insure an understanding of the educational structure of Operation TACT, the following grade level chart is provided:

Grade Level	Target Students	Instructional Program
7th Grade	All Students	Exploration and Understanding of Allied Health Occupations
8th Grade	All Students	Exploration and Understanding of of Allied Health Occupations
9th and 10th Grades	Students Electing the Study of Allied Health Professions	Instruction in Allied Health Professions in the General Science and Biology Courses
11th Grade	Students Electing the Study of Allied Health Professions	Training in One or More Allied Health Occupations in the Special Allied Health Science Course
12th Grade	Students Electing the Study of Allied Health Professions	On-the-Job and Clinical Experiences as a Part of a Special Health Science Course

With the above educational program, the target students received special counselling which dealt with the understanding of the allied health field; matching their individual talents and motivations to allied health occupations;

and receiving special assistance in securing placement in the health field.

Statement of Project Goals

The Operation TACT proposal submitted for funding to the National Institute for Health stated that the objectives or goals of the program would be:

1. The recruiting of students with special emphasis on minority and disadvantaged persons for allied health professions.
2. Giving incentive and support to training, development and mobility.
3. Engaging the learner in developmental work experiences, and
4. Sensitizing facilities and institutions to respond to the need for "a new kind of health manpower to emerge".

The above goals have continued to be the guideposts for Operation TACT activities and were used to determine the kinds of evaluation procedures which were developed to provide appropriate data and information for this report. In an effort to determine the degree to which Operation TACT achieved its stated goals, the remainder of this evaluation report will be devoted to the presentation of data upon which findings and conclusions can be based.

SECTION OF THE REPORT DEALING WITH PROGRAM EFFECTIVENESS

Data Related to Types of Students Served

Tables 1, 2, 3, and 4 provide data related to the project goal dealing with the desire to recruit minority and disadvantaged persons for the allied health professions. From studies conducted by the Research Department of the Hartford Public School System in 1975, it is possible to analyze the ethnic or racial characteristics of the schools involved in the Operation TACT Project as well as some reliable indices related to poverty. The characteristics of students involved in Operation TACT were consistent with the general population of the target schools.

Related data--In terms of ethnic characteristics, Table 1 shows that the TACT schools have high concentrations, and with one exception, a majority of minority group students. Fox Middle School has a Black student population of 88.6 percent. When combined with the Spanish surname students (mostly Puerto Ricans), the percentage of minority students at the Fox Middle School becomes 97.9 percent. With a Spanish surname population of 48.1 percent, the Quirk Middle School shows a total minority population of 77.3 percent when Table 1 is reviewed.

With the exception of Bulkeley High School, the vast majority of students at the other two high schools can be classified as being from minority groups. The figures are 72.6 percent at Hartford Public High and 98.5 percent at Weaver High School. It should be noted that 92.9 percent of the student body at Weaver High School is classified as "Black". From the statistics shown by Table 1, it becomes obvious that with the exception of Bulkeley High School where a relatively few students are involved in the Operation TACT Project, the vast majority of the students available to receive the benefits of this allied

TABLE 1

AN ANALYSIS OF PARTICIPATING SCHOOLS
BY
ETHNIC CHARACTERISTICS
(School Year 1974-75)

Participating School	Total Number of Students	% of Black Students	% of Pupils With Spanish Surnames	% of White Students	% of Other Students
Fox Middle School	1662	88.6	9.3	2.1	---
Quirk Middle School	1513	29.2	48.1	22.2	0.5
Bulkeley High School	1918	14.0	22.9	63.0	0.1
Hartford Public High School	2471	43.3	29.3	27.2	0.1
Weaver High School	2024	92.9	5.6	1.4	0.1

Source: Study Prepared by the Research Department of the Hartford Public Schools, 1975.

health program are either Black or Puerto Rican. The actual distribution of involved TACT students is shown by Table 4 and substantiates the premise that the program served minority students.

Using the principle that being disadvantaged is related to being "poor", Table 2 shows the degree to which the schools participating in Operation TACT enroll welfare children and those eligible to receive "free lunches" because their families are designated by income as being at the poverty level. In terms of "Aid to Dependent Children" (ADC cases), all participating schools show large percentages of pupils in this classification. Bulkeley High School presents the lowest ADC percentage of 19.7. The other participating schools are within the range of 34.9 percent to 43.9 percent in terms of their concentration of ADC or welfare cases.

To provide a further indication of the racial and poverty characteristics of the students being served by Operation TACT, Table 3 and Figure 1 have been prepared. Table 3 shows the characteristics of the student populations of the elementary schools "feeding" pupils into the Quirk and Fox Middle Schools (Operation TACT Institutions). These elementary school attendance areas reflect the nature of the residence areas of Hartford they serve. An examination of the statistics provided by Table 3 makes it obvious that TACT students come from the most deprived residence areas of the City of Hartford which are not only poor but highly segregated. The target schools with a cafeteria program provide "free" lunches to the majority of their students who are eligible because of their low income status. Further, with the exception of five (5) of the nineteen (19) schools listed in Table 3, the rate of ADC or welfare cases ranges from about one-third to three-quarters of the student population. Most certainly, Table 3 supports the fact that the residence areas served by Operation TACT reflect a considerable amount of poverty as well as high concentration of minority group residence.

TABLE 2

AN ANALYSIS OF PARTICIPATING SCHOOLS
BY
INDICES RELATED TO POVERTY
(School Year 1974-75)

Participating Schools	Total Number of Students	Percent of Students Identified as ADC Cases	Percent of Students Eligible and Receiving Free Lunches
Fox Middle School (Grades 7-8)	1662	43.9	62.8
Quirk Middle School (Grades 7-8)	1513	42.1	72.6
Bulkeley High School (Grades 9-12)	1918	19.7	31.8
Hartford Public High School (Grades 9-12)	2471	34.9	51.6
Weaver High School (Grades 9-12)	2024	35.0	55.5

Figure 1 is a map showing the elementary school districts in Hartford in terms of the middle schools into which they "feed" students. This figure provides a visual image of the area "feeding" into Bulkeley directly from the elementary-middle school grades in the southern part of Hartford. This map together with Appendix B shows that in the Northeast and Northwest residence areas where Black and Puerto Rican families are concentrated, the children attend the Fox and Quirk Middle Schools and eventually enroll in Hartford High and Weaver High Schools. With the exception of a few students in the 11th and 12th grades at Bulkeley High School, the Operation TACT program involves pupils coming from the poorest and most concentrated minority group residences, and this pattern is continued through their school lives.

Major findings--From the data presented in this section of the report, it is possible to state the following findings:

1. Operation TACT has been implemented in the schools with children from the "poorest" families in Hartford.

2. Operation TACT has been implemented in schools which serve the vast majority of the Black students and students with Spanish surnames in the City of Hartford

3. Operation TACT has been implemented in the most deprived and segregated parts of the City of Hartford.

4. Operation TACT for the most part serves Black and Puerto Rican students.

TABLE 3

ETHNIC DISTRIBUTION AND SELECTED POVERTY INDICES
OF THE
ELEMENTARY SCHOOL ATTENDANCE AREAS
SENDING STUDENTS TO THE
QUIRK AND FOX MIDDLE SCHOOLS

Name of School	Number of Students	% of Black Students	% of Pupils With Spanish Surnames	% of White Students	% of Other Students	% of Students Identified As ADC Cases	% of Students Eligible and Receiving Free Lunches
Arsenal	760	60.1	38.7	1.2	---	55.6	83.9
Barbour	302	83.4	16.2	0.3	0.1	47.2	No Lunch Program
Barnard-Brown	579	14.2	85.0	0.9	---	51.2	91.5
Burns	982	0.9	54.7	44.1	0.3	41.0	No Lunch Program
Clark	811	83.2	16.2	0.6	---	69.1	80.7
Escuelita Bilingue	283	1.4	98.6	---	---	Not Available	94.3
Fisher	822	87.3	6.8	5.2	0.6	29.6	No Lunch Program
Fox Elementary	937	5.9	44.6	49.0	0.5	39.3	51.3
Hooker	817	34.6	59.2	5.9	0.2	69.6	86.2
Jones	1220	87.3	12.2	0.4	0.1	52.4	62.7
Kinsella	969	24.5	67.9	7.6	---	63.9	80.8
McDonough	670	33.4	24.6	41.5	0.4	20.9	No Lunch Program
New Park Avenue	526	1.5	26.0	72.1	0.4	35.4	No Lunch Program
Rawson	533	85.9	5.8	8.1	0.2	17.6	No Lunch Program
Simpson-Waverly	854	96.8	2.7	0.5	---	48.5	72.2
Twain	596	90.8	5.4	3.5	0.3	17.0	No Lunch Program
Vine	582	77.0	22.3	0.5	0.2	73.4	72.1
Webster	498	20.7	12.4	64.3	2.6	11.5	No Lunch Program
West Middle	510	66.1	24.7	7.6	1.6	52.9	70.6
Wish	675	61.3	38.1	0.4	0.1	67.6	84.3

TABLE 4

THE NUMBER AND CHARACTERISTICS OF PARTICIPATING STUDENTS
IN
OPERATION TACT DURING A TWO-YEAR PERIOD (1973-74 and 1974-75)

Schools With Operation TACT Programs	School Year 1973-74					School Year 1974-75				
	Black Students	Spanish Surname Students	White Students	Other Students	TOTAL	Black Students	Spanish Surname Students	White Students	Other Students	TOTAL
Quirk Middle School	116	79	55	--	250	120	105	75	--	300
Fox Middle School	(Program not offered)			--		221	24	5	--	250
Hartford Public High School	75	31	34	7	147	87	31	29	13	160
Weaver High School						553	45	40	--	638
Bulkeley High School						2	8	15	--	25
Total Number of Students	191	110	89	7	397	983	213	164	13	1373
				15						

Data Related to Field Trips and Work Experiences

An important part of the instructional program of Operation TACT involved the "hands on" experiences through which students were prepared for employment in the allied health field. These "hands on" experiences were conceived as operating at two different levels. Level one was considered as being the field trips which brought instructional resources to the classroom and meaning to theoretical considerations. Meaningful education most certainly became a reality when students were able to view and experience a selected allied health service activity related to what was being studied in their classrooms.

Appendix C lists the field trips taken by students at the various grade levels. These field trips were designed to complement specific instructional goals set for each phase of the allied health training program. It seems worthwhile to point out that teachers were trained to use field trips with the technique of proper preparation for the planned out-of-the-classroom experience as well as adequate follow-up back in the school.

A second level of "hands on" learning activities was the work or clinical experiences provided the advanced students of Operation TACT. To indicate the depth and scope of these work experiences, the activities of one group of 12th grade students at the Newington Veterans Hospital during the 1974-75 school year were carefully analyzed. Through this analysis of one selected group of students, the degree to which work or clinical experiences were provided through the Operation TACT structure can be realized.

Related data--As previously mentioned, Appendix C describes the field trips used by Operation TACT to make its allied health education more meaningful. Beginning in the 7th grade, the field trips were designed to provide target

students with a broad orientation to the allied health field. In the 8th grade, the same general goal of broad orientation to the allied health field formed the basis for the prescribed visits, but these specific trips provided the students with a more sophisticated view of the health area and its opportunities.

Beginning in the 9th grade, the field trips were planned to give participating students a view of specific or specialized operations related to the allied health field. It was hoped that through this type of occupational exploration, participating students would start to put into place their own interests, talents, and future aspirations for a vocational career.

An examination of the field trips listed as being appropriate for 9th, 10th, and 11th grade students shows the desire on the part of curriculum planners of Operation TACT to expose the target youths to the entire allied health field and at the same time relate specialized scientific training in the classroom to the reality of the actual operation of patient-care institutions and their ancillary service agencies or departments.

To provide a descriptive analysis of the work or clinical experiences provided 12th grade students involved in the Operation TACT program, Table 5 has been prepared. This table, showing what a selected group of participating students accomplished at a cooperating hospital, provides an excellent illustration of the breadth and scope of the practical, "hands on" experiences which were used in the final training activities of participating students. On-the-job training in most hospital departments was provided and students were given the opportunity to experience actual work conditions as well as evaluate their own personal skills. An examination of the work performed by the students shows good depth and appropriateness for their age as well as the skills of the students. It might be stated that the general aspects of hospital life such as administration, business office work or maintenance were not a part

TABLE 5

WORK OR CLINICAL EXPERIENCES
OF
OPERATION TACT PUPILS
(School Year 1974-75)

HOSPITAL DEPARTMENT	WORK PERFORMED
Dietetics	Labelled glasses Labelled paper cups Measured milk into glasses Prepared food trays Cleaned tables and dishes Wrapped bread and cookies Measured juice into glasses Took food to patient cafeteria Operated dishwasher Helped prepare salads Gave food trays to patients Opened cans of fruit Covered milk glasses Refrigerated food trays Worked in Dietician's Office Prepared sandwiches Cleaned counter tops Helped prepare meat for cooking Made nourishment rounds Prepared vegetables Cracked eggs Visited Morgue to view parts of the body (liver, brains, etc.)
Central Supply	Filed contractor's folders and vouchers Typed invoices Operated key punch machine
Medical Technology Laboratory	Operated the separation machine Visited the Pathology Laboratory Viewed diseased cell tissue Used microscope Did retics and platelet counts Did blood typing Reviewed uses of laboratory machine Completed gram stains Viewed V.D. testing Worked in Blood Bank Learned to identify enzymes Viewed parts of the body (liver, heart, eye, etc.)

	Viewed testing procedures for selected diseases
	Assisted in making specimen slides
	Viewed an autopsy
	Viewed hematology tests
	Performed Coombs Test
	Observed cross-matching and packing of cells
	Observed variety of laboratory tests
Rehabilitative Medicine	Assisted in the walking of patients
	Catalogued books
	Assisted in occupational therapy procedures
	Assisted the Physical Therapist in working with patients
	Viewed exercising prescribed by physical therapist
	Assisted with patient activities in the wards
	Completed filing of patient records
	Filled up whirlpool bath
	Folded supplies such as towels, etc.
	Made ADL cuffs
	Helped recreation therapist
	Learned use of weaving loom
Nursing	Made beds
	Filled patient water pitchers
	Observed removal of deceased patient
	Wrapped dressing pads
	Transported ward beds and other patient equipment
	Took blood pressures
	Operated centrifuge machine
	Toured hospital with Nursing Director
	Assisted nurse in back and foot care procedures
	Gave bed baths
	Assisted in movement of patient
	Took pulses
	Took temperatures
	Changed patient's dressings
	Fed patients
	Gave bed pans to patients
Library	Opened and sorted mail
	Filed patient cards
	Catalogued medical journals
	Prepared articles for doctors
	Re-shelved publications
	Prepared cards for new books
	Answered telephones
	Checked out books and periodicals
	Prepared paperwork for bookbinding

	Returned books to shelf Looked up information for doctors
Respiratory Unit	Recorded readings on flow meters Stacked shelves
Dental Laboratory	Cleaned dentures Sterilized instruments Viewed making of dental impressions Made dental molds from Morgue specimens
Pharmacy	Filled pill bottles Labelled bottles Performed clerical and typing duties Assisted in preparing intravenous jars Was shown various measures and units Delivered prescriptions
X-Ray	Observed G.I. series Viewed x-ray of gall stones Assisted in taking chest x-rays Helped develop x-rays Viewed x-ray film with doctors Viewed Intravenous Pyelogram and Barium enema testing
E.K.G.	Did E.K.G. tests on patients
Research	Observed operations on animals Cleaned and sterilized operating room Viewed cultures from teeth of rats Dissected parts of animals
P.A.D.	Wrapped fluffs Dressed wounds Observed tracheotomy and arteriography trays being prepared Helped prepare specialized trays Stocked basin Rolled bandages Transported patient equipment to wards

of the experiences of this particular group. Nevertheless, the work activities of these 12th grade allied health students from Hartford Public High School at the Newington Veterans Hospital were varied both in terms of hospital areas and depth of skill required.

Major findings--From the descriptive information related to the field trips and work experiences developed for Operation TACT students, the following findings seem justified:

1. The field trip program of the instructional structure for Operation TACT was extensive and important to the learning of participating students.
2. The field trip program was related to the exploration and training goals of the various grade levels of the Operation TACT educational structure.
3. The work or clinical experiences of participating 12th grade students were varied in terms of the general overall services of a patient-care institution. Further, these experiences were of sufficient depth to challenge the most skilled or talented students.
4. The work or clinical experiences seemed to ignore the business, administrative, maintenance, and general ancillary departments of the cooperating institution examined for this report.

Data Related To Employment Opportunities In The Hartford Area

To secure the information needed to determine the job opportunities in the Hartford area related to the health field, an attempt was made to analyze positions listed in the computer job bank of the Connecticut Employment Service. This procedure was not productive as this computer service had listings for a seven-month period only, and the categories of positions were not sufficiently descriptive to determine job levels, training needed, etc. Obviously, the job bank data was not a complete or accurate source of information for this report.

As a substitute for job bank listings, it was decided to use a survey[1] conducted by the Connecticut Institute for Health Manpower Resources, Inc. in 1973 and a second study[2] prepared by this same institute in September of 1974.

Related data--The information presented by Table 6 indicates that the employment opportunities in the Hartford area related to health services are considerable in number and cover a wide range of specialties. If the number of full-time equivalent positions in the health field are reviewed with the additional factor of turnover in mind, it becomes obvious that placement is a distinct possibility for well-trained, motivated applicants. In considering the number of vacancies, it should be kept in mind that the present turnover rate in the health field is between 2 and 3-1/2%.

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[1] "Study of Educational Programs and Employment Opportunities in Health", CIHMR, Hartford, Connecticut, September 1973.

[2] "Employment for the Disadvantaged in the Health Field", CIHMR, Hartford, Connecticut, 1974.

The need for nurse's aides, LPN's and orderlies is the greatest in terms of the number of vacancies available in the Hartford area. Statistics from the calendar year of 1974 indicate that 2160 positions were listed for nurse's aides and orderlies. This same 1974 study of vacancies in the health field showed that 1075 LPN's were needed. Clearly, these two categories of positions dealing with direct patient care provided the largest number of vacancies. Table 6 also shows that large numbers of dietary aides, ward clerks, community health aides, medical technicians, and dental laboratory as well as other laboratory assistants were also needed.

The list of vacancies shown by Table 6 indicates that most of the health field specialties were represented in terms of available positions. However, it needs to be pointed out that some specialties showed a limited number of vacancies and were restricted to a small number of positions. This fact seems to point out that a person training for the health field should not be too "narrow" in terms of a special career goal or preparation. From the data presented by Table 6, it would seem to be advisable to prepare for a health field cluster such as patient care, laboratory work, therapy, etc. Regardless, a variety of positions were available in the Hartford area during 1973 and 1974. The employment picture in the allied health field was bright for those persons with the proper training and talent for placement.

Major findings--From the data provided by Table 6 and the source documents used to provide this employment information, the following findings are justified:

1. The largest number of positions available deal with direct patient care; i.e., nurse's aides, orderlies, and LPN's.
2. The entire range of health services occupations at the entry level were listed as available positions during 1973 and 1974.
3. The technical areas such as laboratory aides or assistants, EKG technicians, therapists, and dental technicians produced several

vacancies for persons with appropriate training and skills.

4. The vacancies in the Hartford area listed for the health field totalled approximately 7634 full-time equivalent positions. (Of these 7634 positions, 667 were designated as assistants, technicians, and other levels requiring community college preparation.

TABLE 6

AN ANALYSIS OF THE JOB OPPORTUNITIES IN THE HARTFORD AREA
RELATED TO
THE ALLIED HEALTH FIELD

Job Categories	Full-Time Equivalent Positions*	Pertinent Comments
Child Care Worker	18.5	
Community Health Aide	24.7	
Counsellor (Rehabilitation and Others)	35.5	
Cytotechnologist	15	
Dental Laboratory Assistant	137.2	
Dietary Aide	625.5	Includes dietary assistants
Educational Aide	55.5	Includes mental retardation and learning center aides
EKG Technician	33.0	
Environmental Health Technician and Technologist	36	
Histologic Technician	22	
Infant Care Worker		
Laboratory Aide	110.4	Includes laboratory technician and assistant
Licensed Practical Nurse		
Medical Laboratory Technician	130	
Medical Record Technician	34.0	
Medical Technician	220	
Medical Transcriptionist	80.0	
Nurse's Aide and Orderly	2160	
Occupational Therapy Aide		
Physical Therapy Aide	30	Includes physical therapy assistants
Psychiatric Aide	210.5	
Public Health Aide	11.0	Includes school health aide and public health assistant
Recreation Aide	2.0	
Social Service Aides	15	Includes high school entry level as well as associate degree requirement
Ward and Record Clerk	239.0	
TOTAL	7634.7	

NOTE: Sources for data are reports listed as footnotes 1 and 2 of this report.

*Indicates the positions available in 1973 or 1974. The larger figure is used when vacancies were reported for both 1973 and 1974.

Information Related to Cooperating Persons, Agencies and Institutions

An important aspect of Operation TACT was the development of a cooperating consortium of related agencies and institutions in order to concentrate a variety of resources on the activities of the project. In addition, Operation TACT involved a variety of resource people who contributed greatly to the training of target pupils for careers in the allied health field. With this in mind, it is the purpose of this section of the report to provide a description of the range of persons, institutions, and agencies which were enlisted to provide assistance in the development of this project.

Related information--As described in the beginning sections of this report, a consortium was formed to develop a cooperative relationship with appropriate institutions in the implementation of the Operation TACT project. The consortium was made up of the following institutions and agencies:

1. The Hartford Public School System
2. The University of Connecticut
3. The Hartford Urban League
4. The Community College of Greater Hartford
5. The Manchester Community College

Appropriate representatives of the above consortium were assigned to the Operation TACT program and served the project during its development, implementation, and evaluation phases.

In addition to representatives of the consortium of cooperating institutions and agencies, other appropriate persons were used to create an Executive Board for Operation TACT. Appendix D gives a list of the members of the Executive Board of Operation TACT during the 1972-73 school year. This listing shown as Appendix D also provides a means of indicating the wide variety of resources which were used to develop policy for this program. It seems worthwhile to mention that work on the Executive Board was a volunteer service.

Another aspect of Operation TACT was the development of an Advisory Council to broaden participation in the Project and secure as much input from other parts of the Greater Hartford community as possible. Appendix E shows the membership of the Advisory Council of Operation TACT during the 1972-73 school year. In addition, Appendix F is presented to describe the way in which members of the Advisory Committee were assigned to the different task force in the development phase of Operation TACT.

To provide advice, field trip sites, and appropriate locations at which advanced students in the allied health program could secure work or clinical experiences, specific relationships were developed with four major hospitals in the Greater Hartford area. These hospitals were:

1. Newington Veterans Hospital
2. Mount Sinai Hospital
3. Hartford Hospital
4. Saint Francis Hospital

Appendix G is a description of each of these health service institutions and gives the types of educational opportunities which were made available to participating students through these hospitals.

Another means of providing an understanding of the degree to which resource people became involved in the Operation TACT program is to view the list of persons participating in Health Career Day Program conducted by high schools in the Project. Appendix H is a list of resource persons who participated in Health Career Day programs at these high schools.

Major findings--The information related to the range of community participation in Operation TACT and presented in this section of the report justifies the following findings:

1. Operation TACT involved a wide range of community institutions, agencies, and persons on a decision-making basis.

2. Operation TACT through an Advisory Council involved a variety of resource

persons in the development and implementation of the Project.

3. Operation TACT involved the major health care institutions in the development of program and direct educational services for participating students.

4. Operation TACT used a broad spectrum of the community in bringing learning resources to participating schools in the Hartford system.

Data Related to Student and Teacher Opinions Dealing With the Program

To provide some insights into the attitudes and opinions of students as well as teachers concerning Operation TACT, two evaluation procedures were developed for this purpose. First, students and teachers involved in the program were asked to complete questionnaires which were designed to reflect attitudes and to secure information related to the specific goals of Operation TACT. Second, a series of structured interviews were held with randomly selected classrooms of target pupils so that their important feelings about the program could be recorded. In the case of target pupils, a seven (7) percent sample of those involved in the program was identified and these students were asked to complete questionnaires. Also, ten (10) classrooms of pupils were identified to participate in structured interviews designed to bring out attitudes related to the program.

In terms of teachers, twelve (12) of those directly involved in the program were identified by a random procedure and were asked to complete a questionnaire as well as open-ended questions requiring responses concerning the instructional activities of Operation TACT. The student questionnaire is shown as Appendix H, the teacher questionnaire as Appendix I, and the structured interview form has been placed with this report as Appendix J.

Data or information dealing with student opinions and attitudes--With questions dealing with the pupils' knowledge about the allied health field (Questions #1 through #4 on Table 7), a definite pattern emerges which is quite complementary in terms of what the students feel they have received from the program. Table 7 shows that 7th and 8th grade students at modest percentage levels feel they were motivated to know more about the health field; have a desire to enter the allied health field as a career; feel confident they can

TABLE 7

A SUMMARY OF STUDENT RESPONSES TO AN EVALUATION QUESTIONNAIRE ADMINISTERED AT THE END OF THE 1974-75 SCHOOL YEAR

Questions	Percentages of Responses by Grade Level														
	Grades 7 and 8					Grades 9 and 10					Grades 11 and 12				
	None	Little	Quite a Bit	Much	Don't Know	None	Little	Quite a Bit	Much	Don't Know	None	Little	Quite a Bit	Much	Don't Know
PART ONE (Opinions Toward Overall Program)															
1. Has your exposure to Allied Health motivated you to want to know more about the field?	0	43% (N=13)	40% (N=12)	17% (N=5)	0	09% (N=5)	24% (N=14)	19% (N=11)	29% (N=17)	19% (N=11)	03% (N=1)	20% (N=6)	29% (N=9)	45% (N=14)	03% (N=1)
2. Has your exposure to the Allied Health field initiated any desire to consider it as a career?	20% (N=6)	30% (N=9)	03% (N=1)	27% (N=8)	20% (N=6)	19% (N=5)	25% (N=14)	25% (N=14)	18% (N=10)	22% (N=12)	03% (N=1)	26% (N=8)	19% (N=6)	52% (N=16)	0
3. How much progress have you made in developing your ability to tell what workers do in several Allied Health fields:	03% (N=1)	33% (N=10)	27% (N=8)	23% (N=7)	13% (N=4)	16% (N=9)	26% (N=14)	35% (N=19)	07% (N=4)	16% (N=9)	03% (N=1)	29% (N=9)	36% (N=11)	29% (N=9)	03% (N=1)
4. How much progress have you made in developing ability to explain steps necessary to enter an Allied Health Career, including the training and educational background needed?	14% (N=4)	38% (N=11)	17% (N=5)	14% (N=4)	17% (N=5)	14% (N=8)	36% (N=20)	20% (N=11)	12% (N=7)	18% (N=10)	16% (N=8)	34% (N=17)	26% (N=13)	20% (N=10)	04% (N=2)

Questions	Percentages of Responses by Grade Level														
	Grades 7 and 8					Grades 9 and 10					Grades 11 and 12				
	None	Little	Quite a Bit	Much	Don't Know	None	Little	Quite a Bit	Much	Don't Know	None	Little	Quite a Bit	Much	Don't Know
5. How much have you improved your behavior as it relates to the world of work(dependability, attendance, personal appearance,etc)	10% (N=3)	07% (N=2)	38% (N=11)	34% (N=10)	10% (N=3)	09% (N=5)	29% (N=16)	36% (N=20)	27% (N=15)	0	6% (N=2)	19% (N=6)	38% (N-12)	34% (N=11)	03% (N=1)
6.How much have you gained in your ability to maintain your own health through the use of appropriate Health Care?	07% (N=2)	27% (N=8)	38% (N=11)	21% (N=6)	07% (N=2)	05% (N=3)	35% (N=20)	30% (N=17)	16% (N=9)	14% (N=8)	0	13% (N=4)	32% (N=10)	52% (N=16)	03% (N=1)
7.How much progress have you made in developing your ability to demonstrate knowledge of how health care facilities operate?	21% (N=6)	31% (N=9)	31% (N=9)	10% (N=3)	07% (N=2)	16% (N=9)	33% (N=19)	25% (N=14)	11% (N=6)	16% (N=9)	06% (N=2)	36% (N=12)	24% (N=8)	27% (N=9)	06% (N=2)
8.Have you talked to your parents about Allied Health?	47% (N=14)	27% (N=8)	07% (N=2)	20% (N=6)	0	58% (N=33)	18% (N=10)	12% (N=10)	11% (N=6)	02% (N=1)	29% (N=9)	13% (N=4)	26% (N=8)	32% (N=10)	0
9.Have you talked to your peers about Allied Health?	17% (N=5)	50% (N=15)	17% (N=5)	17% (N=5)	0	46% (N=26)	19% (N=10%	21% (N=12)	07% (N=4)	07% (N=4)	27% (N=8)	40% (N=12)	13% (N=4)	20% (N=6)	0
10.Do you feel that Allied Health is an important field to study?	0	03% (N=1)	20% (N=6)	77% (N=23)	0	05% (N=3)	16% (N=9)	39% (N=2 2)	30% (N=17)	09% (N=5)	03% (N=1)	06% (N=2)	30% (N=10)	61% (N=20)	0

Questions	Percentages of Responses by Grade Level														
	Grades 7 and 8					Grades 9 and 10					Grades 11 and 12				
	None	Little	Quite a Bit	Much	Don't Know	None	Little	Quite a Bit	Much	Don't Know	None	Little	Quite a Bit	Much	Don't Know
PART TWO (Opinions Toward Field Trips)															
1. Did the field trip(s) increase your knowledge of Allied Health Professions?	59% (N=13)	14% (N=3)	--- 0	05% (N=1)	23% (N=5)	24% (N=13)	25% (N=14)	22% (N=12)	24% (N=13)	05% (N=3)	09% (N=2%)	27% (N=6)	27% (N=6)	27% (N=6)	09% (N=2)
2. Do you feel that the field trip(s) you have had increased your understanding of the Curriculum?	81% (N=21)	12% (N=3)	04% (N=1)	0	04% (N=1)	18% (N=10)	24% (N=13)	25% (N=14)	18% (N=10)	15% (N=8)	04% (N=1)	30% (N=7)	22% (N=5)	30% (N=7)	13% (N=3)
3. Do you feel that enough time was allowed for you on field trip(s) to gain the most from your experience?	72% (N=18)	08% (N=2)	12% (N-3)	04% (N=1)	04% (N=1)	27% (N=13)	22% (N=11)	12% (N-6)	24% (N=12)	14% (N=7)	20% (N=5)	36% (N=9)	20% (N=5)	24% (N=6)	--- 0
4. Would you like to have more field trips to Allied Health facilities:	42% (N=13)	06% (N=2)	10% (N=3)	32% (N=10)	10% (N=3)	09% (N=5)	07% (N=4)	32% (N=18)	38% (N=21)	14% (N=8)	04% (N=1)	04% (N=1)	32% (N=9)	61% (N=17)	--- 0
PART THREE (Opinions Toward Other Instructional Activities)															
1. Do you find the films helpful in explaining the Allied Health Professions?	04% (N=1)	14% (N=4)	32% (N=9)	50% (N=14)	--- 0	17% (N=9)	28% (N=15)	25% (N=13)	19% (N=10)	11% (N=6)	--- 0	27% (N=8)	33% (N=10)	40% (N=12)	--- 0

Questions	Percentages of Responses by Grade Level														
	Grades 7 and 8					Grades 9 and 10					Grades 11 and 12				
	None	Little	Quite a Bit	Much	Don't Know	None	Little	Quite a Bit	Much	Don't Know	None	Little	Quite a Bit	Much	Don't Know
PART THREE (cont'd)															
2. Have you been able to relate the films to the curriculum?	10% (N=3)	24% (N=7)	28% (N=8)	21% (N=6)	17% (N=5)	20% (N=10)	35% (N=18)	16% (N=8)	08% (N=4)	22% (N=11)	17% (N=5)	31% (N=9)	41% (N=12)	10% (N=3)	--- 0
3. Have the guest speakers been of any help in your deciding if you would like to involve yourself in the Allied Health Professions?	03% (N=1)	22% (N=7)	38% (N=12)	31% (N=10)	06% (N=2)	27% (N=14)	17% (N=9)	19% (N=10)	19% (N=10)	17% (N=9)	03% (N=1)	27% (N=8)	37% (N=11)	17% (N=5)	17% (N=5)
4. Have you been able to identify some health needs in your/community after you've heard the guest speakers?	13% (N=4)	22% (N=7)	38% (N=12)	16% (N=5)	12% (N=4)	31% (N=16)	35% (N=18)	20% (N=10)	02% (N=1)	12% (N=6)	10% (N=3)	28% (N=8)	38% (N=11)	21% (N=6)	03% (N=1)
5. Have the lectures been related to the Curriculum?	06% (N=2)	29% (N=9)	35% (N=11)	13% (N=4)	16% (N=5)	30% (N=16)	13% (N=7)	24% (N=13)	11% (N=6)	22% (N=12)	03% (N=1)	28% (N=8)	41% (N=12)	17% (N=5)	10% (N=3)
6. Have you been exposed to Allied Health Professions via written information:	31% (N=10)	28% (N=9)	22) (N=7)	09% (N=3)	09% (N=3)	33% (N=16)	24% (N=12)	18% (N=9)	08% (N=4)	16% (N=8)	11% (N=3)	37% (N=10)	33% (N=9)	11% (N=3)	07% (N=2)
7. Have you been exposed to Allied Health Professions via Allied Health Professionals (e.g. Doctors, Nurses, X-Ray Technicians, Therapists)?	03% (N=1)	25% (N=8)	44% (N=14)	44% (N=7)	06% (N=2)	26% (N=14)	11% (N=6)	15% (N=8)	39% (N=21)	09% (N=5)	03% (N=1)	31% (N=9)	25% (N=7)	38% (N=11)	03% (N=1)

Questions	Percentages of Responses by Grade Level														
	Grades 7 and 8					Grades 9 and 10					Grades 11 and 12				
	None	Little	Quite a Bit	Much	Don't Know	None	Little	Quite a Bit	Much	Don't Know	None	Little	Quite a Bit	Much	Don't Know

NOTE: On Part Two of the questionnaire, the students were asked to evaluate the field trips provided by the program.

The students responded to this question in the following fashion:

41% felt the field trips were very interesting.
32% felt the field trips were interesting.
17% felt the field trips were uninteresting.
09% felt the field trips were very uninteresting.

explain what workers do; and lastly, can explain the steps necessary to enter the field. An analysis of the responses of 11th and 12th grade pupils to these same questions show much larger percentages of positive answers. Seventy-four (74) percent of the 11th and 12th grade students felt they had been motivated "quite a bit" or "much" to know more about the health field. These same 11th and 12th grade students responded at a seventy-one (71) percent level as being stimulated "quite a bit" or "much" to initiate a career in the allied health field. In the same categories of "quite a bit" or "much" responses, sixty-five (65) percent of the students felt they could explain what workers do in the allied health field. Table 7 shows that forty-six (46) percent or less than half of the 11th and 12th grade students felt they knew how to enter the allied health field. Their responses to Question #4 of Table 7 seem to indicate that the counselling function for Operation TACT should be examined with a thought of improving its capabilities.

Large percentages of students answered Question #5 with the "quite a bit" or "much" categories which indicates that the target pupils felt the program had changed their behavior and attitudes in a positive direction. This was true of 7th and 8th grade as well as upper-level students. Seventy-two (72) percent of the junior high pupils responded that they improved their behavior as it relates to work at the "quite a bit" or "much" levels. This is, indeed, a significant response related to one of the goals of the program.

Table 7 shows that pupils at all grade levels felt they had gained in their ability to maintain their own health care.

In terms of their understanding about the operation of health care facilities only the 11th and 12th grade pupils responded at a large percentage level to the "quite a bit" or "much" categories. With some criticism of the field trips and clinical parts of the program shown by later questions, it seems justified to state that the Operation TACT staff should be concerned about this instructional

"hands on" part of the program.

Questions #8 and #9 show that the majority of target pupils of Operation TACT do not discuss the allied health field with their peers or parents. An examination of the responses at all grade levels shows a consistency with this statement of fact.

Lastly, Table 7 shows that the vast majority of the pupils participating in Operation TACT felt that the health field is an important area to study.

No attempt was made to analyze the responses to each question shown as Part Two of Table 7. It seems sufficient to state that the percentages of responses indicate that the field trip program of Operation TACT should be expanded and improvements made. The pupils feel that this need for improvement exists.

Responses to Part 3 of the questionnaire dealing with the instructional program of Operation TACT show that the majority of students were pleased with the educational structure. The only significant pattern which seems to emerge deals with the positive feelings of students toward the films which were used in the instructional activities of the program.

Table 8 shows that student responses to a structured interview situation were consistent with their answers to the questions listed on the questionnaire (See Table 7). First, the students participating in the interviews responded more often in a positive fashion than in a negative fashion. Seventh and eighth grades felt that the curriculum taught about specific jobs and changed their thinking about a career. These outcomes for an exploratory curriculum in any vocational area are entirely consistent with the goals for this type of program. It is interesting to note that the responses of 9th and 10th grade pupils participating in the Operation TACT program were for the most part related to selecting a career, becoming acquainted with new parts of the allied health field, and developing a career interest. These responses were similar to those given

TABLE 8

A SUMMARY OF STUDENT RESPONSES
TO A
SERIES OF STRUCTURED EVALUATION INTERVIEWS

	Positive Statements		Negative Statements	
	Description of Responses	Times Mentioned	Description of Responses	Times Mentioned
7th and 8th	Curriculum taught about specific jobs	3	Not enough field trips	1
	Changed my thinking about a career	4	Would like to visit other health places	3
	Now understands the allied health field	1		
9th and 10th	Beneficial in selecting a career	4	Did not teach me about a job	1
	Have become acquainted with new parts of the allied health field	3	Wanted more visits to health agencies and institutions	5
	Have developed a career interest	4	Can't make up his mind about what field holds his interest	1
	Learned about specific allied health occupations by visits to hospitals	2		
	Enjoyed field trips	1		
11th and 12th	Helped in selecting a job	4	Wanted more clinical experiences	6
	Changed their career choice or developed a new interest in the allied health field	9		
	Felt the clinical experiences were beneficial	9		
	Provided new career choices	1		
	Learned skills in the allied health field	1		
	Courses were interesting	1		

by seventh and eighth grade pupils.

Target pupils in the 11th and 12th grades responded in large percentages that the program changed their career choices. Further, these same pupils were consistent with the questionnaire in pointing out that the clinical experiences provided by the program were most beneficial. This was stated in spite of their desire to have more of this type of instruction and at an improved level (See next paragraph). Another issue with four positive responses dealt with the fact that the program was helpful in selecting a job. The structured interviews seemed to reflect positive attitudes on the part of Operation TACT students that the program was beneficial in establishing personal career goals in the field of allied health.

On the negative side, Table 8 indicates that the pupils felt the field trips and clinical experiences should be improved and provided on a larger scale. Again, the data received from both the questionnaires presented by Table 7 and the structured interviews given by Table 8 are consistent.

Data or information dealing with teachers' opinions and attitudes--A part of the evaluation procedure dealt with the attitudes and opinions of teachers directly involved in the Operation TACT program. Table 9 indicates that the highest percentages of "quite a bit" or "much" responses were given by teachers to the questions related to a better understanding on the part of students to the career aspects of the allied health field. For example, eighty-three (83) percent of teacher responses to Question #1 concerning the ability of participating pupils to differentiate what workers do in some of the allied health careers were in the category of "quite a bit". Sixty (60) percent of the teachers' responses were "quite a bit" to the question asking whether the program provided an understanding of the procedures necessary to enter the health field. (This is a contradiction to the student responses to Question #4 of Table 7.) One-half of the teachers responded with the answer of "little" or

"none" to questions dealing with the ability of pupils to wisely choose an occupational career in the allied health field, the ability to perform the basic skills in selected allied health occupations, and the ability to describe the use of specific equipment in health care facilities. The responses of teachers to this questionnaire dealing with the outcomes of Operation TACT seems to show that the instructional staff felt that the pupils had learned about the general aspects of the allied health field but were weak in specific technical procedures and skills.

Responding to structures interview questions, the teachers felt that the most positive aspect of Operation TACT was its delivery in giving participating pupils an understanding of the job opportunities in the allied health field. Again, this information provided by teachers on the questionnaire and summarized by Table 9 was consistent. On the negative side, the teachers felt the major problem of the program was the level of difficulty of the curriculum and reading materials developed for Operation TACT.

Major findings--The information provided by Tables 7, 8, 9 and 10 which was secured from questionnaires and structured interviews involving selected students and teachers of Operation TACT, justifies the following findings:

1. A large percentage of students and teachers of Operation TACT felt the program was helpful in providing an understanding of the allied health field and its related career possibilities.

2. A large percentage of upper-grade pupils of Operation TACT felt motivated to learn more about the allied health field.

3. A large percentage of the pupils in Operation TACT indicated the need for better counselling related to how to specifically enter the allied health field.

4. A large percentage of pupils in Operation TACT felt their behavior and attitudes were made more positive by the program.

TABLE 9

A SUMMARY OF TEACHER RESPONSES
TO AN
EVALUATION QUESTIONNAIRE ADMINISTERED AT THE END OF THE 1974-75 SCHOOL YEAR

QUESTIONS	Responses by Teachers				
	None	Little	Quite a Bit	Much	Don't Know
1.Do you think that the students in your classes in which you use the allied health curriculum have made progress in developing their ability to differentiate what workers do in some of the allied health careers?			83% (N=10)	8% (N=1)	8% (N=1)
2.Do you think that the students in your classes in which you use the allied health curriculum understand the procedures necessary to enter allied health careers, particularly training, education, etc.?		30% (N=3)	60% (N=6)	10% (N=1)	
3.Do you think that the students in your classes in which you use the allied health curriculum have developed the ability to choose wisely an occupational career in allied health?		50% (N=5)	50% (N=5)		
4.Do you think that the students in the classes in which you use the allied health curriculum have developed the ability to understand how Health Care facilities operate?		30% (N=3)	30% (N=3)	40% (N=4)	
5.Do you think that the students in your classes in which you use the allied health curriculum have developed the ability to per-	10% (N=1)	40% (N=4)	10% (N=1)	40% (N=4)	
6. Do you think that students in your classes in which you use the allied health curriculum have the ability to identify and describe the use of specific equipment in health care facilities?		50% (N=5)	40% (N=4)		10% (N=1)
7.Do you think the students in the classes in which you use the allied health curriculum have developed attitudes and behaviors appropriate to the world of work (dependability, attendance, personal appearance, etc.?)		30% (N=3)	50% (N=5)	20% (N=2)	

TABLE 10

A SUMMARY OF TEACHER RESPONSES*
TO A
SERIES OF SPECIFIC INTERVIEW QUESTIONS

Description of Positive Responses	Times Mentioned	Description of Negative Responses	Times Mentioned
Showed skills needed for allied health career.	2	Scheduling of students was poorly done.	2
Want to continue using curriculum.	3	Curriculum and reading materials too difficult.	5
Gave understanding of job opportunities in the allied health field.	6	Class placement poor	1
Good program for terminal student.	1	More field trips and clinical experience should be used.	3
Provided instruction outside the school.	1	Better communications needed between grade level teachers.	2
Gives pupils direction.	1	More training for laboratory jobs.	1
Provided good instructional materials for Science Courses.	2		
Students benefit from the program.	1		

*Responses of twelve (12) teachers.

5. A large percentage of pupils at all grade levels felt that they had developed skills to better maintain their own health care.

6. A large percentage of pupils and teachers felt the program should give further emphasis to an improved field trip program, improved clinical experiences, and more technical information dealing with the operation of health care facilities.

7. A large percentage of pupils involved in Operation TACT felt that the goal of career exploration had been achieved by the program.

8. A large percentage of pupils of Operation TACT felt their career choices had been affected in a positive manner by the program.

9. A large number of teachers felt that the curriculum and reading materials of Operation TACT were too difficult for the participating pupils.

SECTION OF REPORT DEALING WITH CONCLUSIONS AND RECOMMENDATIONS

Conclusions--The major findings secured from the procedures used to evaluate Operation TACT justify the following conclusions:

1. The Operation TACT program did recruit and serve minority as well as disadvantaged persons.
2. The Operation TACT program was a positive force in providing broad training for the allied health field. Further, Operation TACT provided a good exploratory program related to the allied health field which gave general information and concepts needed to understand its functioning in the community.
3. The Operation TACT program had a positive influence on the attitudes, behavior patterns, and school success of participating pupils.
4. The Operation TACT program did engage participating pupils in "hands on" experiences through field trips and clinical assignments involving participating agencies and institutions. It is important to note that participating students and pupils felt this part of the program should be expanded and improved.
5. The Operation TACT program made positive gains in sensitizing facilities and institutions to the need of cooperating in the development of new resources for the allied health field.

Recommendations--On the basis of the information or data presented by this report, the following recommendations are made:

1. It is recommended that the Hartford School System continue to offer training in the allied health field as a part of its curriculum in both the middle and high schools. This could be accomplished by securing a director for the program through outside funds and the

redirecting of existing instructional and counselling resources to the implementation of the philosophy, curriculum and instructional patterns of Operation TACT.

2. It is recommended that in the continuation of Operation TACT, consideration be given to the expansion and improvement of the field trip as well as clinical experience aspects of the program. In addition, some attention should be directed at an examination of the counselling services being made available to participating pupils.
3. It is recommended that the roles of the cooperating agencies and institutions be carefully defined in conjunction with the instructional patterns of the curriculum so that specific responsibilities are completely understood.

APPENDIX A

APPENDIX A

INITIAL FULL-TIME STAFF OF OPERATION TACT

(School Year 1972-73)

I. PROJECT DIRECTOR

Frederick G. Adams, D.D.S., M.P.H.
Dean of the School of Allied Health Professions,
University of Connecticut

II. ASSISTANT PROJECT DIRECTOR
Patricia M. Madison, M.Ed.

III. CURRICULUM SPECIALIST
Eleanor F. Schmeh

IV. COUNSELING SPECIALIST
Thelma S. Tauris

V. EDUCATIONAL ASSISTANT
Cheryl C. Woodward, M.P.H.

VI. STENOGRAPHER III

VII. TYPIST

APPENDIX B

APPENDIX B

MIDDLE AND HIGH SCHOOL ASSIGNMENTS OF STUDENTS ATTENDING THE VARIOUS ELEMENTARY SCHOOLS OF THE HARTFORD PUBLIC SCHOOL SYSTEM (School Year 1974-75)

Grades K-6	Grades 7-8	Grades 9-12
Arsenal	Quirk M	Hartford
Barbour	Fox M	Weaver[1]
Barnard-Brown	Quirk M	Hartford
Batchelder	Batchelder	Bulkeley
Burns	Quirk M	Hartford
Burr	Burr	Bulkeley
Clark	Fox M	Weaver[1]
Dwight	Burr or Naylor	Bulkeley
Fisher	Fox M	Weaver
Fox Elementary	Fox E Quirk M	Bulkeley Hartford
Hooker	Quirk M	Hartford or Bulkeley[2]
Jones	Fox M	Weaver[1]
Kennelly	Kennelly	Bulkeley
Kinsella	Burr or Fox E Quirk M	Bulkeley Hartford
McDonough	Quirk M	Hartford
Naylor	Naylor	Bulkeley
New Park Avenue	Quirk M	Hartford
Rawson	Fox M	Weaver
Simpson-Waverly (PK-6)	Fox M	Weaver[1]
Twain	Fox M	Weaver

Grades K-6	Grades 7-8	Grades 9-12
Vine (K-3) West Middle (4-6) (K-3) Jones (4-6) (K-4) Barnard-Brown (5-6)	Quirk M Fox M Quirk M	Hartford Weaver(1) Hartford
Webster	Quirk M	Hartford
West Middle	Quirk M	Hartford
Wish	Fox M	Weaver(1)

(1) Under a temporary spot redistricting plan adopted by the Hartford Board of Education on April 13, 1972, some pupils who live in the Barbour, Clark, Jones, Simpson-Waverly, and Wish districts enrolled at Hartford Public High School as ninth graders during the 1972-73 school year. Under a similar one-year plan adopted on May 1, 1973, some pupils in the Clark, Jones, and Simpson-Waverly districts enrolled at Hartford Public High School as ninth graders during the 1973-74 school year. All of these pupils, once enrolled at HPHS, may, if they so desire, remain at that school until graduation.

(2) All seventh and eigth-grade pupils in the Bulkeley-Hooker district are assigned to the Quirk Middle School for their seventh and eighth-grade program after which they have the option of attending either Bulkeley High School or Hartford Public High School for their high school experience.

APPENDIX C

APPENDIX C

OPERATION T A C T

A CATALOG OF SUGGESTED FIELD TRIPS TO BE USED FOR EDUCATION RELATED TO ALLIED HEALTH PROFESSIONS IN THE GREATER HARTFORD AREA

Operation TACT
School of Allied Health Professions
The University of Connecticut
26 Woodside Circle
Hartford, Connecticut 06105

Telephone: 232-4483

INTRODUCTION

This report contains a listing of suggested field trips for each grade level (7 through 11) included in the Operation TACT program. They have been described to coincide with the curriculum units for these grade levels. Their purpose is to provide for sight experiences and hands-on experiences (where possible) in order that the students may better relate to their classroom instructions. The field trips also have as their purpose to acquaint the student with the nature of jobs in the Allied Health field and with the Allied Health professionals who perform these jobs.

These field trips should be carried out in conjunction with the Allied Health Units that have been written for each grade level.

ARRANGEMENTS FOR FIELD TRIPS:

Personnel at the Operation TACT office will supervise the arrangements for a field trip upon request from the teacher. Forms for field trips (see attached appendix) will be made available to each teacher. It is requested that these forms be submitted no later than four weeks prior to the field trip in order that the best possible arrangements can be made.

They may be hand carried to the Operation TACT Office, 26 Woodside Circle, Hartford, or they may be mailed to the following address:

The Counseling Specialist
Operation TACT
26 Woodside Circle
Hartford, Connecticut 06105

FIELD TRIP PLANNING GUIDELINES

For your information the following will be considered by the person making arrangements in planning for field trips related to Allied Health curricula:

A. What can a specific facility provide?

   1. Occupational definition

   2. Operational mechanisms of facility

   3. Practical experience

B. Availability of Staff

   1. Can personnel be provided to answer questions, direct activities, give a demonstration or a talk?

C. What latitude is there for structuring visits to meet specific purposes?

   1. Possibility of utilizing a facility for a number of visits

      a. tour or site visit

      b. film presentation

      c. specific or general lecture

      d. task performance

      e. demonstration of techniques and methods

D. The length of visits

E. The number of students that can be accommodated per visit

F. The amount of supervision that will be required

G. Registration and advanced notification requirements. Person to be contacted, telephone number.

H. Eating accommodations, if necessary.

I. Can facility be tapped as a source for speakers, films, equipment loan and literature?

J. Can students participate in a volunteer or work-study program?

INDEX TO SUGGESTED FIELD TRIPS FOR THE 7TH GRADE

1. Field Trip to a Community Health Clinic

   Educational Objective--To provide students with an understanding of the several health activities carried on in a neighborhood clinic.

2. Field Trip to a Conventional Hospital

   Educational Objective--To provide students with insights into the different departments and occupational possibilities in a conventional hospital.

3. Field Trip to Mobile Units providing Health Services (Bloodmobiles and Tuberculosis X-Ray Unit)

   Educational Objective--To provide students with an understanding of health services which can be delivered through a mobile facility temporarily in a neighborhood location.

4. Field Trip to a Rescue Unit of either a Fire or Police Department

   Educational Objective--To provide the students with a knowledge of the emergency health services available on a community level.

5. Field Trip to a Secondary School with Training Component for Allied Health Services

   Educational Objective--To provide students with insights into training possibilities for an occupational career in Allied Health service.

FIELD TRIP TO A COMMUNITY HEALTH CLINIC

1. Recommended Grade Level--It is felt that this type of trip would be an exploration of the student's own community and should be made available to 7th grade students (junior high).

2. Educational Objective--To provide the students with an understanding of the several health activities carried on in a neighborhood health clinic.

3. Health Occupations or General Area Emphasized--A trip to this type of clinic will provide the student with a view and understanding of (1) preventive health care; (2) health needs of inner-city people; (3) community medical care; and (4) referral services. In a general sense, the student will be in contact with workers and services which represent the following occupations:

    a. Nursing Service
    b. Preventive Medical and Dental Services
    c. Social Health Services
    d. Administration and Operation Services

4. Description of the Institution to be Visited--A community health center is designed to serve a neighborhood of an inner-city which usually lacks adequate health services in both a delivery and a preventive sense. It is an institution which can provide minor treatment, but relies heavily on the counseling and education functions when community residents have health problems. Further, it has a close relationship with hospitals and social agencies, so that referral is efficiently achieved when major resources are needed. The people receive medical check-ups, dental therapy, advice and education through a variety of means when they visit the clinic. Most important, the clinic maintains medical records and has home contact with the people of the neighborhood.

FIELD TRIP TO A CONVENTIONAL HOSPITAL

1. Recommended Grade Level--Because this trip is designed to provide the students with an overall view of hospital activities, it is suggested that it be accomplished at the 7th grade level (junior high).
2. Educational Objective--To provide students with insights into the different departments and occupational possibilities in a conventional hospital.
3. Health Occupations or General Area Emphasized--This trip will provide the students with an exploratory experience related to the purposes, functions, and occupational requirements of a conventional hospital. During this hospital visit, the students will get a glimpse or brief contact with all departments in this type of institution; i.e., nursing, medical, laboratory, ancillary and administrative. It should be remembered that this trip is designed as an orientation to hospital activities and not for the purpose of creating a depth of understanding in any one area.
4. Description of the Institution to be Visited--A conventional hospital is a patient care institution which is usually supported by public or private funds. This type of institution is essentially designed to serve persons with illnesses requiring admission into the residence area of the hospital, but, in addition, serves others on an out-patient as well as service basis. In terms of health services, the typical functions and activities in a conventional hospital are:

    a. Medical Treatment
    b. Surgical Procedures
    c. Nursing Care
    d. Diagnosis (including Laboratory Procedures, X-Ray, etc.)
    e. Out-Patient Treatment and Emergency Treatment
    f. Ancillary Services (including housekeeping, dietetics, laundry, engineering, personnel activities, administration, etc.)

FIELD TRIP TO MOBILE UNITS PROVIDING HEALTH SERVICES
(Bloodmobile and/or Tuberculosis X-Ray Unit)

1. Recommended Grade Level--This field trip, or in some instances a visit to the school by mobile units, is designed to provide younger students with a general appreciation or understanding of the health service activities carried on in mobile units functioning in their communities. Therefore, the field trip is recommended for 7th grade students.

2. Educational Objective--To provide students with an understanding of health services which can be delivered through a mobile facility temporarily in a neighborhood location.

3. Health Occupations or General Area Emphasized--These special purpose mobile units will provide students with an understanding of: (1) a type of preventative health activity; (2) the diagnostic functions which can take place in mobile units; (3) precautionary measures required in the taking of blood and x-ray procedures; and (4) a general understanding of some types of equipment used in the delivery of health services. Further, the students will have the opportunity to view persons involved in the following health occupations:

    a. X-Ray Technicians
    b. Laboratory Technicians
    c. Nursing Personnel
    d. Equipment Operators

4. Description of the Institution to be Visited--The bloodmobile sponsored by the Red Cross and the mobile X-ray units operated by the Respiratory Disease Association or public health departments are specialized in their functions, and it is essential that the students understand that mobile units are used for other purposes. (For example, medical examinations are provided in area where this type of service is not easily accessible to people.)

The X-ray unit restricted to the purpose of screening the chest area of participating persons will provide a view of a mass diagnostic activity. Further, it will show the procedures used in taking a chest X-ray and the processes used in protecting the technician from the hazards of radiation. Although the development of X-ray film and the analysis of an X-ray picture are not accomplished in the mobile unit, the technician can explain his preparation of the film and the subsequent diagnostic procedures.

The bloodmobile being a vehicle to transport the health equipment and to provide the specialized facilities for blood analysis and storage, usually is used to complement a larger physical space where the primary activity of securing blood from volunteers takes place. A temporary ward-like arrangement is created in the supplemental space while the laboratory activities and storage is accomplished within the mobile unit.

FIELD TRIP TO A RESCUE UNIT OF A FIRE OR POLICE DEPARTMENT

1. Recommended Grade Level--This visitation experience should be made available to 7th grade students (junior high) as an exploration of community health services.
2. Educational Objective--To provide the students with a knowledge of emergency health services available on a community level.
3. Health Occupations or General Area Emphasized--This exploratory experience related to emergency health service is intended to provide the students with an appreciation of the first aid capabilities of police and fire units in a community. Because these municipal workers are not primarily considered health workers, this trip will have little value as an occupational orientation activity. Rather, it will provide for an exposure to emergency equipment which can be used by persons with minimum training.
4. Description of Institution to be Visited--Rescue units of a fire or police department are informal in nature and evolve around the use of specialized portable equipment. All fire and police personnel are trained in the area of first aid and are given an understanding of the use of a resuscitator, oxygen and other types of emergency equipment. In most departments, a group of fire or police personnel have been assigned a major responsibility for rescue operations and have received indepth training for this responsibility. This field trip should reveal the staffing patterns developed by police and fire departments for rescue operations.

FIELD TRIP TO A SECONDARY SCHOOL
with a
TRAINING COMPONENT FOR ALLIED HEALTH SERVICES

1. Recommended Grade Level--Being a trip designed to provide an awareness of types of training available for a variety of health service occupations, this visitation to a secondary school with a health service curriculum will give 7th grade pupils (junior high) an opportunity to view advanced students being prepared for specific occupations.
2. Educational Objective--To provide students with insights into training possibilities for an occupational career in Allied Health Services.
3. Health Occupations or General Area Emphasized--This visit to the secondary school where target students will eventually be enrolled can provide an understanding of the relationship between the instruction in the junior high school, specialized training in the secondary school, and the eventual possibility of employment as a health worker. At the secondary school, the 7th grade pupils can observe "first hand" older students being trained for occupational areas within the health field.
4. Description of the Institutions to be Visited--Because field trips are to be considered as an integral part of a complete junior and senior high school educational sequence, this particular activity should be completed within the school system or school district where the students are enrolled. In Hartford, the trip would be accomplished in the secondary school in which the 7th grade pupils would eventually attend. The pupils would be taken to the designated secondary school and become involved with the students participating in the specialized training being provided to 11th graders. It is expected that the 7th grade pupils would visit the clinical instructional areas, observe groups of advanced students involved in a

variety of instructional activities, and be provided the opportunity to discuss and raise questions with the students participating in the training.

FIELD TRIP TO A "WELL CHILD" CLINIC
CONDUCTED BY
THE PUBLIC HEALTH NURSING ASSOCIATION

1. Recommended Grade Level--It is recommended that this field trip be taken by 8th grade (junior high) students for the purpose of exploring additional health services activities and to secure knowledge of an area of preventative health services.
2. Educational Objective--To provide students with an appreciation and understanding of a type of community public health service.
3. Health Occupations or General Area Emphasized--It is expected that the students will have a visitation experience which will give them an understanding of preventative measures required to keep young children in good health. Further, they will have the opportunity to view a major function of public health nursing.
4. Description of the Institution to be Visited--"Well Child" Clinics are usually held in a neighborhood health center which is easily accessible to the people. A major responsibility of this type of clinic is to provide an educational program for pregnant women and their husbands; provide instruction for the instituting of good health practices for parents after the child is born; and to provide immunization and other types of necessary preventative medical activities designed to keep children well.

It needs to be understood that the clinic is a location for the implementation of group education and preventative health services, but is supplemented by individual visitations to the homes of their target groups.

INDEX TO SUGGESTED FIELD TRIPS FOR THE 8TH GRADE

1. Field Trip to a Vocation Technical School providing Training in the Allied Health Field

   Educational Objective--To provide students with insights into the training and employment opportunities in the Allied Health Service Field.

2. Field Trip to a "Well Child" Clinic conducted by the Public Health Nursing Association

   Educational Objective--To provide students with an appreciation and understanding of a type of community public health service.

3. Field Trip to a Quantity-Food Preparation Facility

   Educational Objective--To provide the students with an understanding of the sanitary and other procedures used in the quantity-food preparation. Further, this will give an understanding of the vocational possibilities in the preparation of food for health facilities.

4. Field Trip to a Rehabilitation Center

   Educational Objective--To provide the students with an understanding of the vocational possibilities in Allied Health Service Fields which are part of the rehabilitation of handicapped persons.

5. Field Trip to a Regional Center Serving Handicapped Children

   Educational Objective--To provide the students with an understanding of the health needs of handicapped children and the vocational possibilities in this area.

FIELD TRIP TO A VOCATIONAL TECHNICAL SCHOOL PROVIDING TRAINING IN THE ALLIED HEALTH FIELD

1. Recommended Grade Level--This trip is designed for 8th grade (junior high) pupils as a means of increasing their awareness of health service occupations and the availability of training opportunities.
2. Educational Objective--To provide students with insights into the training and employment opportunities in the Allied Health Field.
3. Health Occupations or General Area Emphasized--This specialized type of institution will provide students with an understanding of an alternative type of secondary education. The pupils will have a visitation experience in a vocational school which is based on the premise that its students have made a decision and are ready for the specialized training needed to enter their chosen occupation. At the regional vocational school, the pupils will have the opportunity to view high school students being trained for the following specialties in the health service field:

    a. Dental Technicians
    b. Laboratory Technicians
    c. Licensed Practical Nurses
    d. Medical Secretaries

4. Description of the Institution to be Visited--The Vocational Technical Schools are operated by the State of Connecticut for the purpose of providing occupational training in career specialties not made available to students in the secondary schools operated by the local school districts. Each Vocational Technical School offers a curriculum of specific occupational training required to enter a "job cluster". Some of these technical schools provide for the entry of 9th grade students for the purpose of providing a school year of exploratory vocational experiences. These students begin their specialized vocational training in the 10th grade.

In other instances, technical schools will only provide training for 10th grade students who have decided on their career specialty.

The Vocational Technical School provides for academic instruction at all grade levels; i.e., English, social studies, etc., along with the vocational training.

FIELD TRIP TO A QUALTITY-FOOD PREPARATION FACILITY

1. Recommended Grade Level--Being a field trip designed to provide students with a general knowledge of the skills and activities required to prepare food on a quantity basis, it is recommended that it be made available to 8th graders (junior high).
2. Educational Objective--To provide students with an understanding of the sanitary and other procedures used in the preparation of food. Further, this trip will give an understanding of the vocational possibilities in the preparation of food for health facilities.
3. Health Occupations or General Area Emphasized--This trip will emphasize the general area of food preparation. It is expected that the students will visit a relatively large restaurant where food is prepared for consumption by the general public. A later experience at a higher grade level is planned to expose students to the dietetic considerations required in the preparation of patients in a health facility.
4. Description of the Institution to be Visited--As previously mentioned, it is expected that this field trip will involve a visit to a large restaurant where food is prepared on a quantity basis. The operation of the food preparation center should be the focal point of the visitation. The food preparation center or kitchen should reveal a staffing pattern of specialties required to operate a restaurant. Procedures and equipment needed to insure good health standards, the maintenance of quality foods, and the esthetics involved in the preparation of dishes can be easily observed during this restaurant visit.

   Lastly, it should be pointed out in preparation for this field trip that the restaurant or institution they will visit deals with the functions of food preparation, customer service, atmosphere, and public convenience.

FIELD TRIP TO A REHABILITATION CENTER

1. Recommended Grade Level--This type of field trip is designed to broaden the understanding of 8th grade (junior high) students interested in exploring the Allied Health Field.

2. Educational Objective--To provide students with an understanding of the vocational possibilities in Allied Health Services which are part of the rehabilitation of handicapped persons.

3. Health Occupations or General Areas Emphasized--Being a rather specific health activity, the rehabilitation center can gain an appreciation of the major types of handicaps and the ways in which they affect different people. In terms of health occupations, the students can observe persons involved in the following activities:

    a. Educational services for handicapped persons
    b. Vocational training for handicapped persons
    c. Physical rehabilitation or therapy for handicapped persons

    Rehabilitation centers run the wide range of occupations in the Allied Health Field and would include all areas with the exception of those medical activities requiring hospital or residence facilities and staff.

4. Description of the Institution to be Visited--The rehabilitation center has as its target group persons who have a physical handicap, either on a permanent or temporary basis. Beginning with the physical handicap, it is recognized that other services related to the handicaps are needed.

    The center will give the students a view and appreciation of various types of equipment and activities employed in the treatment of several types of physical handicaps.

    Within the center will be areas devoted to the education of handicap persons in skills they can develop for employment. These areas are

specialized in nature and relate to what is possible achievement in a vocational sense for different physical handicaps.

Lastly, the center will provide an experience for the students which relate to the broad area of social services for handicap persons and the means of referral used to bring other institutions into the rehabilitation process.

FIELD TRIP TO A REGIONAL CENTER
SERVING
HANDICAPPED CHILDREN

1. Recommended Grade Level--It is felt that this trip is appropriate for 8th grade students (junior high) who are in the process of exploring career possibilities in the health service field.

2. Educational Objective--To provide students with an understanding of the health needs of handicapped children and the vocational possibilities in this area.

3. Health Occupations or General Area Emphasized--For the purpose of focus, this field trip has been designated as a visitation to a regional center serving retarded children. The trip could be easily shifted to other institutions serving the blind, the deaf or emotionally disturbed and accomplish the same basic objective. Regardless, if the trip is made to a regional center for retarded children, the students will observe workers involved in the following health occupations:

    a. Health Aides
    b. Nursing
    c. Therapy Specialization
    d. Food Preparation
    e. Social Services

    Because these regional centers were created for the purpose of providing educational services, the students making this trip will have the additional advantage of gaining an understanding of vocational opportunities in related fields--providing for the specialized learning needs of exceptional children.

4. Description of the Institution to be Visited--Regional centers are designed to serve retarded children and are operated as well as supported by the Mental Health Department of the State of Connecticut. They operate on a "day" basis with the premise that retarded children who do not require

constant custodial care are better served in the family situation as contrasted with a residence facility.

A regional center serves a geographic area composed of several towns or cities. The state has instituted a sufficient number of centers to cover all regions of Connecticut.

Basically, a regional center is developed around an educational service for its target children. Classrooms, special facilities, and the curriculum are designed to serve the learning and physical needs of this type of exceptional child. Because retarded children have related handicaps such as: physical defects; adjustment problems; and special vocational needs, the regional center provides many supplementary services usually lacking in the typical public school program designed for this target group of children. This intermediate institution serving a group of children not able to function in a public school program for retarded children, but not so severely handicapped that they require residence care, provides an observation experience which illustrates the characteristics of both types of institutions.

INDEX TO SUGGESTED FIELD TRIPS FOR THE 9TH GRADES

1. Field Trip to a Medical Center with Offices where Several Types of Physicians Practice

   Educational Objective--To expose students to the different types of medical specialties and to provide them with an understanding of the activities, as well as procedures utilized by practicing physicians.

2. Field Trip to a Dental Office

   Educational Objective--To provide the students with an understanding of dental procedures and the various activities and skills required of persons in this area of health occupations.

3. Field Trip to a School of Pharmacy

   Educational Objective--To provide students with an understanding of the procedures and skills required of pharmacists. Further, the students will gain an understanding of various skills and competencies required in the preparation and the operation of a pharmacy.

4. Field Trip to Ancillary Departments of a Hospital

   Educational Objective--To provide the students with an understanding of the sanitary and preventative procedures used by laundry, housekeeping, engineering, dietary, and other ancillary hospital departments to protect and improve the health of their patients. Further, this trip will provide the students with an understanding of additional career opportunities in the Allied Health Field.

5. Field Trip to an Ambulance Unit

   Educational Objective--To provide the students with an understanding of emergency medical services and the types of procedures which can be accomplished in an ambulance facility.

FIELD TRIP TO A MEDICAL CENTER WITH OFFICES
WHERE
SEVERAL TYPES OF PHYSICIANS PRACTICE

1. Recommended Grade Level--It is recommended that this trip be an integral part of the 9th Grade Allied Health General Science Course in view of its emphasis on the development of understanding procedures used by the different medical specialties.

2. Educational Objective--To expose students to the different types of medical specialties and to provide them with an understanding of the activities as well as procedures utilized by practicing physicians.

3. Health Occupations or General Area Emphasized--Although the focal point of the trip deals with the procedures and activities of medical specialists, the students must understand the role of physicians in order that they will be able to conceptualize their own possible relationship to health services. Students will be able to observe the following health service occupations as they relate to the activities of physicians:

    a. Nursing
    b. Medical Secretaries
    c. Receptionists
    d. Medical Records Clerks
    e. Laboratory Specialists

4. Subject Area or Areas--Designed to be a part of the Allied Health General Science Course, this trip should become an instructional activity in the unit dealing with medical specialties. This activity may be repeated utilizing different combinations of specialists.

5. Description of the Institution to be Visited--It is planned that a large and sophisticated medical office b uilding be visited to accomplish this field trip. Essentially, a medical building provides space where a physician can practice and serve his patients with supplementary services available within the same premises. Within the building, the students

will have contact with general practitioners, pediatricians, osteopaths, orthopedic surgeons, ophthalmologists or possibly psychiatric specialists.

It is expected that the participating physicians will demonstrate the diagnostic procedures and equipment needed in their specialty and take a volunteer student or patient through a general type of problem associated with his work. In this type of activity, it is expected that the demonstration will involve the services of supplementary health workers available to the participating physician.

FIELD TRIP TO A DENTAL OFFICE

1. Recommended Grade Level--This visitation is designed for students enrolled in the 9th Grade Allied Health General Science Course.
2. Educational Objective--To expose students to dental procedures and the various activities and skills required of persons in this area of health occupations.
3. Health Occupations or General Area Emphasized--The general area of dental care and treatment will be the focus of this trip. As with physicians, the activities of Doctors of Dental Medicine need to be understood by those interested in Allied Health Occupations, so that the interrelationships of roles can be defined and understood.

   In terms of health service occupations, the students will have the opportunity to view persons involved in the following areas:

   a. Dental Hygienists
   b. Dental Aides
   c. Receptionists
   d. Nurses
   e. Laboratory Technicians
   f. Dental Secretaries and Clerks

4. Subject Area or Areas--Units dealing with oral hygiene and physiology in the Allied Health General Science Course are the appropriate study areas where this trip should be implemented.
5. Description of the Institution to be Visited--It is expected that the students will visit a medical office building which is quite large, so that the different specialties can be observed. The physical building merely provides space where dentists, oral surgeons, dental hygienists, can operate. As a part of the field trip experience, the dental special equipment used in the prevention, diagnostic and treatment functions. Hopefully, a student or patient will volunteer to become a part of the demonstration, so that

students can view the important relationships between the activities of the highly skilled dental doctor and the supplementary services required to complete this area of health care.

FIELD TRIP TO A SCHOOL OF PHARMACY

1. Recommended Grade Level--Being a learning experience designed to give students specific understandings of the technical, business and health responsibilities of pharmacists, this field trip is planned as a part of the 9th Grade Allied Health General Science Course.
2. Educational Objective--To provide students with an understanding of the procedures and skills required of pharmacists. Further, the students will gain an understanding of the various skills and competencies required in the preparation of prescriptions and the operation of a pharmacy.
3. Health Occupations or General Area Emphasized--This field trip is designed to provide students with an appreciation of the multifacets required of a pharmacist and the ownership of a pharmacy. The preparation of prescriptions and the role of a druggist as a member of the health team will be the major understanding resulting from this visitation. In this regard, it is hoped that the student will gain insights into the training and skills required of persons dealing with drugs and the precautions required to insure good health standards. Further, the students can at least conceptualize the occupational possibilities related to this health field. They are:
    a. Pharmacy Clerks
    b. Drug Manufacturing Workers
    c. Merchandisers
    d. Drug Salesmen
4. Subject Area or Areas--This field trip should be a learning activity carried on as a part of the Allied Health General Science Course. Specifically, the students should make this trip while they are studying units dealing with chemistry and entrepreneurship in the health service field.
5. Description of the Institution to be Visited--Being a degree-granting program, the training of pharmacists takes place at four-year institutions. The School of Pharmacy has as its unique responsibility the teaching of the specific

skills and competencies required to be licensed as a pharmacist in the State of Connecticut. It needs to be recognized that the pharmacist is not only trained in his specialty, but a major part of his advanced education takes place in other schools and colleges within a university complex; i.e., school of arts and sciences and school of business. Therefore, it becomes important for the field trip students to understand the relationships of the School of Pharmacy to the total program of the university and the ways in which the specialized training in pharmaceutical skills relates to other broad educational areas.

The students will observe the formal classroom training and the clinical experiences needed to educate pharmacists. Further, they will view and observe demonstrations in the functional relationship between knowledge in the study of chemistry and drug preparation for a variety of health purposes. Lastly, the students will gain knowledge in the precautionary measures required in the preparation and distribution of drugs in order to insure good health standards in our society.

FIELD TRIP TO ANCILLARY DEPARTMENTS OF A HOSPITAL

1. Recommended Grade Level--This field trip should be taken by students in the 9th Grade Allied Health General Science Course to broaden their understanding and specific knowledge of the variety of skills required to operate a hospital or health center.

2. Educational Objective--To provide students with an understanding of the sanitary and preventative procedures used by laundry, housekeeping, engineering, dietary and other ancillary hospital departments to protect and improve the health of their patients. Further, this trip will provide the students with an understanding of additional career opportunities in the Allied Health Field.

3. Health Occupations or General Areas Emphasized--Although the students will gain some general knowledge dealing with sanitation, nutrition, and preventative health procedures, the purpose in instituting this trip to specialized ancillary hospital departments is to provide the students with a realization that a hospital requires persons with all levels of training as well as competencies. Also, every hospital worker is a member of the health team and performs a service which is directly related to the well-being of patients. Specifically, the students will observe and secure information from workers involved in the following occupations:

    a. Laundry Workers and Supervisors
    b. Dietitians
    c. Food Preparation Workers
    d. Maintenance Personnel
    e. Housekeeping Workers and Supervisors
    f. Skilled Craftsmen (Plumbers, Carpenters, etc.)
    g. Medical Secretaries and Clerks
    h. Administrative Personnel
    i. Data Processing Personnel

4. Subject Area or Areas--It is suggested that students take this trip while studying communicative diseases and preventative health services units of

the Allied Health General Science Course.

5. Description of the Institution to be Visited--It is expected that the students will have already participated as 7th graders in a field trip designed to provide them with an overall view of hospital functions. Therefore, this trip will take pupils to specialized hospital facilities which deal, for the most part, with indirect patient services. It is essential that the relationships between patient care and ancillary services be established through demonstrations as well as direct discussions with the workers involved. The equipment or the procedures being viewed could be replicated in other types of institutions, but the essential ingredient in the learning is to indicate how these activities relate to health care in both a treatment and preventative sense.

FIELD TRIP TO AN AMBULANCE UNIT

1. Recommended Grade Level--This field trip is designed as a learning activity for students enrolled in the 9th Grade Allied Health General Science Course.

2. Educational Objective--To provide the students with an understanding of emergency medical services and the types of procedures which can be accomplished in an ambulance facility.

3. Health Occupations or General Areas Emphasized--In a general sense, the trip is intended to provide the students with a knowledge of emergency techniques and equipment utilized for accident and critically ill patients. Use of blood, oxygen and other appropriate first aid measures administered by ambulance personnel with appropriate training will be taught. Health occupations to be observed are:

    a. Ambulance Drivers
    b. Ambulance Health Workers

4. Subject Area or Areas--As a part of the Allied Health General Science Course, this trip will be accomplished as a part of the units dealing with blood and physiology.

5. Description of the Institution to be Visited--For the most part, ambulance services in Connecticut are a private enterprise, community public health service or a social service provided by a civic organization. The ambulance as a specialized emergency vehicle has the equipment which is essential for critically ill patients. It is important that the communications equipment be understood and demonstrated as an integral part of the emergency structure in the delivery of services.

   An important part of this trip will be the demonstration of the various types of emergency equipment with an explanation of the procedures as

well as decisions made by ambulance staff as they meet different situations and ultimately end their services at a hospital.

INDEX TO SUGGESTED FIELD TRIPS FOR THE 10TH GRADE

1. Field Trip to a Medical Laboratory

   Educational Objective--To provide students with an understanding of the various laboratory tests and procedures used to diagnose illness and make medical judgments.

2. Field Trip to a Pollution Control Center

   Educational Objective--To provide students with biological principles used in pollution control. Also, the dangers inherent in the pollution of our environment.

3. Field Trip to an Immunization Clinic

   Educational Objective--To provide students with the knowledge of the use of vaccines and related procedures used to prevent illness and disease.

4. Field Trip to a Physical Therapy Center

   Educational Objective--To provide students with an understanding of the bone and body tissues, as well as the procedures used to repair these types of bodily defects.

FIELD TRIP TO A MEDICAL LABORATORY

1. Recommended Grade Level--With an emphasis on the techniques used to analyze tissue, blood, urine and other bodily specimens, it is recommended that this trip be taken by 10th grade students enrolled in a biology course related to Allied Health Services.
2. Educational Objective--To provide students with an understanding of the various laboratory tests and procedures used to diagnose illness and make medical judgments.
3. Health Occupations or General Area Emphasized--Because the students will have had previous orientation to the career possibilities in the areas of medical, cardiac, cystology and hemotology laboratory work, the focus of this trip will be centered on the general skills, techniques and procedures used by technicians in this field. However, the students will be able to observe the pathologist, medical technician and laboratory assistants at work.
4. Subject Area or Areas--This trip will be designated as a learning activity while the students are working with units of biology dealing with the body, body maintenance and the systems of the body.
5. Description of the Institution to be Visited--This trip to a medical laboratory will introduce the student to physical facilities which are designated to accommodate a fact finding operation. The students will be visiting a laboratory facility with specialized equipment and staff capable of examining tissue, analyzing blood, making urine analysis, providing X-Ray analysis, and a variety of other diagnostic techniques. Fundamental to the success of this trip will be the demonstrations and explanations of laboratory procedures provided by the technicians.

FIELD TRIP TO A POLLUTION CONTROL CENTER

1. Recommended Grade Level--Building on previous learning, this field trip is appropriate as a part of the 10th grade biology course.

2. Educational Objectives--To provide students with the biological principles used in pollution control. Also, the dangers inherent in the pollution of our environment.

3. Health Occupations or General Area Emphasized--The purpose of this field trip is twofold: 1 - to provide the student with an appreciation and understanding of dangerous pollution conditions affecting our environment as well as the scientific techniques being instituted to eliminate this menace; and, 2 - to provide for expansion of the thinking of students in terms of Allied Health Occupations. The occupations they will view are:

    a. Sanitation Workers
    b. Laboratory Technicians
    c. Bacteriologist
    d. Clinical Workers
    e. Environmental Specialist

4. Subject Area or Areas--The students will accomplish this trip during their study of units of the biology course dealing with bacteriology, botany and the environment in general.

5. Description of the Institution to be Visited--A pollution control center deals with the contamination of the air, land and water resources of our community. The center has as its major functions: the measurement of pollutions, the surveillance of pollution effects, and the application of purification treatment designed to eliminate conditions of contamination or restore ecological balance. With these responsibilities, the staff of a pollution control center is constantly involved in analysis, testing of materials and samples, and the instituting of treatments designed to have a cleansing effect.

It is expected that the staff persons at the pollution control center will spend considerable time describing this diagnostic-proscriptive activities. Obviously, considerable learning can take place for the students if demonstrations related to specific problems are carried out which the students are participating in this trip.

FIELD TRIP TO AN IMMUNIZATION CLINIC

1. Recommended Grade Level--The trip to an immunization clinic should be accomplished as a part of the biology course that deals with the prevention of diseases.
2. Educational Objectives--To provide students with the knowledge of the use of vaccines and related procedures used to prevent illness or disease.
3. Health Occupations or General Area Emphasized--It is expected that this trip will give students an opportunity to observe activities related to preventative medicine and the diseases which can be controlled by the use of vaccines and other immunization procedures. Most likely, the trip will not provide any new insights into the career opportunities in the health field.
4. Subject Area or Areas--A visit to an immunization clinic should be a part of the biology course when the students are working on units dealing with disease and public health services.
5. Description of the Institution to be Visited--An immunization clinic is usually operated in a health center which is easily accessible to the people requiring service. The clinic provides a variety of activities; it combines many medical and health services for the prevention of disease. It involves physicians and nurses who carry out the medical procedures, but also provide an understanding of the role of health specialist in educating persons so they might practice and institute disease preventing activities into their daily lives. Again, it is important to state that the students will be viewing an activity rather than procedures related to a physical facility. For this reason, they must be prepared prior to the trip so that the observation experience will be a fruitful one.

FIELD TRIP TO A PHYSICAL THERAPY CENTER

1. Recommended Grade Level--This field trip is designed for students enrolled in a 10th grade biology course associated with Allied Health Services. It is expected that the student will have completed previous work and study dealing with the health field.
2. Educational Objectives--To provide students with an understanding of the bone and body tissues as well as the procedures used to repair these types of bodily defects.
3. Health Occupations or General Area Emphasized--The general area of therapy related to the improvement of muscular functions, circulatory systems, and the entire area of bodily motion will be the learning focus of this trip. In addition, the students will be introduced to the health area of prosthetics (artificial limbs) and the therapeutic procedures utilized to prepare patients for this use. As a follow up of previous study, the students will have the opportunity to observe physical therapists, health assistants, vocational rehabilitation specialists, and social service workers involved directly in patient activities.
4. Subject Area or Areas--Units of a biology course dealing with the bone structure, muscular development, circulatory system, and nervous system of the human body is the curricula area in Allied Health for which this trip is designed.
5. Description of the Institution to be Visited--Because the most sophisticated physical therapy operations are usually found in hospital units, it is suggested that this visitation will be carried out at this type of institution. Requiring the use of large pieces of equipment, the physical therapy center is divided into units developed to accommodate special physical, educational, vocational or psychological needs. In these units, the students will have a variety of therapeutic exercises and techniques

used in the recovery process as well as activities designed to treat patients suffering from bodily defects and deficiencies. It is important for the student to observe the degree to which physical therapists must employ a great many psychological techniques in working with patients who have a broad range of emotional adjustments to make as they strive to overcome their physical defects.

FIELD TRIP EXPERIENCES FOR THE 11TH GRADE

Introduction

The clinical experiences designed for 11th grade Allied Health students will be a set of competency-based learning situations in eight to twelve occupational areas. The student will be given the opportunity to acquire indepth knowledge concerning the activity, skill requirement and function of specific health care workers. The experience will be broad enough to allow the student to perform basic tasks and learn appropriate skills through actual involvement in the activity.

Clinical experiences or internship coupled with coordinated didactic study should provide the student with the background and criteria necessary to formulate judgments and assessments that will lend strength to decision-making processes concerning the pursuance of careers in Allied Health. The student should be able to determine whether he is suitable for various types of occupations or whether certain occupations are actually within the realm of his capabilities and preferences.

The following clinical exposures comprise the set of field experiences for the 11th grade.

1) nursing services
2) dental services
3) medical records
4) physical therapy
5) dietetics
6) laboratory services
7) community health services
8) inhalation therapy
9) rehabilitation

10) surgical services

11) X-Ray services

12) administration and operations

13) pharmaceutical services

Description of Suggested Field Trip Experiences for Clinical Exposure in the 11th Grade

The following is a guideline for clinical exposure in several specific areas. The listing is not meant to be all inclusive. Many experiences will be structured in order to meet student and educational objectives.

1. Field Trip to a Medical Center with X-Ray, Pathology and other Diagnostic Facilities

   Educational Objective--To provide the students with lectures, observations and demonstrations related to specialties involved in areas of health diagnosis.

   In this experience, the student can have contact with diagnostic equipment and make observations with the specialist.

2. Field Trip to the Nursing and Administration Departments of a Hospital

   Educational Objective--To provide the students with lectures, observations, and demonstrations of patient care activities on a variety of levels as well as concrete knowledge of the operation of administrative units; i.e., hospital administration, medical records, data processing, personnel activities, and the policy-making structure of a hospital.

3. Field Trip to a Dental Laboratory

   Educational Objective--To provide the students with lectures, observations, and demonstrations of the procedures used to manufacture dentures. In making this trip, the student will become knowledgeable about the many techniques employed in the preparation of dentures as well as the procedures used in

order to obtain a finished product.

4. Field Trip to a Pharmaceutical Manufacturing Firm

   Educational Objective--To provide the students with lectures, observations, and demonstrations of the research, manufacturing and control procedures used in the manufacture of drugs.

5. Field Trip to a Veterinary Hospital

   Educational Objective--To provide the students with lectures, observations, and demonstrations of surgical procedures. The student will be afforded the opportunity to gain some understanding of surgical procedures and techniques as employed with animals. The student should be able to generalize the information to such a degree that he will see the relationship as it applies to the surgical treatment of humans.

6. Field Trip to an Inhalation Therapy Unit

   Educational Objective--To provide the student with an experience that will lead to some skill acquisition with respect to the instruments and procedures utilized in the treatment of respiratory ailments.

7. Field Trip to Regional Technical Schools

   Educational Objective--To provide the students with the opportunity to observe training classes for Allied Health Careers.

REQUEST FORM FOR FIELD TRIPS

Name(s) of Requestor _____

_____

Request submitted to _____

Date of Request _____

_____

_____

Date for Field Trip _____

Alternative Date(s) _____

_____

Number of People: Students _____ Chaperone _____

Transportation required _____

Hour of Departure _____ Hour of Return _____

Purpose of Field Trip: _____

_____

_____

_____

_____

_____

_____

FOR OFFICE USE ONLY. DO NOT WRITE BELOW THIS LINE.

Field Trip request received _____ by _____
Date Signature

Request granted _____ Request not granted _____
Date Date

Date of Field Trip _____ Time: From _____ To _____

Transportation to be provided _____

Signed: _____

Date: _____

Form 2: MMF/1974

APPENDIX D

APPENDIX D

Operation T A C T

Executive Board Members:

*Frederick G. Adams, D.D.S., M.P.H.
Dean of School of Allied Health
The University of Connecticut

Arthur C. Banks, Ph.D.
President, Greater Hartford Community College

Mr. William Brown
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Mr. John LeConche
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Community Representative

Mrs. Julia Ramos-McKay
Community Representative

Claire Reinhardt, Ph.D.
Consultant, Health Occupations Programs
State Department of Education

Mr. Peter Roach
Administrative Assistant to the Superintendent
Hartford Public Schools

* Chairman

APPENDIX E

APPENDIX E

SCHOOL OF ALLIED HEALTH PROFESSIONS
THE UNIVERSITY OF CONNECTICUT
OPERATION T A C T
(Towards an Allied Health Career Today)

ADVISORY COUNCIL MEMBERSHIP*

*Additional personnel will be added to this listing as the project develops.

Operation T A C T

Advisory Council Membership

1. Louis Abbey
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175 Enfield Street
Hartford, Connecticut

APPENDIX F

APPENDIX F

Advisory Council Task Forces

October 17, 1972

Needs Analysis

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Paul Pentz
Louis Abbey
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Bill Brown
John Freyman
Stephen Berman
Ellsworth Grant (Mrs.)
Sandy Klebanoff

Development and Implementation

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John Gardner
John Sablon
Bernard Shea
Evans Daniels
Joseph Deag

Curriculum

George Christensen
Joseph Grant
Loralee Houston
Willard Duff
Connie Johnson
Charles Quinn

Counseling

Jacqui Anderson
Sholom Bloom
James Scott
Juanita Payne
Dorothy Payne
Francis Dellafera
John Mitchell
Diane Kramer (Mrs.)

APPENDIX C

APPENDIX G

MOUNT SINAI HOSPITAL

375-bed teaching hospital. Affiliated with UConn School of Medicine. Hospital has Chiefs of Service system--Chiefs are also Professors; e.g., Chief of Medicine is an Assistant Professor; Chief of Surgery is an Assistant Professor; etc.

Hospital was dedicated in 1972 (new hospital). 9-floor new building. Hospital has four floors for patients, 44-bed units on each floor.

Hospital provides general medical services, emergency care, and specialties services--termination of pregnancy (abortion clinic). Also has very good OB GYN Unit. Has house staff of residents and interns, rotating UConn students. Hospital also uses UConn nursing students for clinical experience. Hospital also has innovative health education program with community input and outreach sponsored in part by CHF (Combined Hospital Fund which constitutes major organizations or corporations which put into one pot all the money they would ordinarily send to individual charities). Hospitals that share in this fund are the Institute of Living, Hartford Hospital, St. Francis, Mt. Sinai. So much money is allotted to each hospital; e.g., research program, so much money is given to that particular hospital for that purpose, etc.

Hospital has Diabetic Clinic every week, high blood pressure clinic, follow-through program after the patient is discharged.

Hospital has the only inpatient child and adolescent psychiatric unit in a general hospital; i.e., in the Greater Hartford Area. The nearest one is Yale. Patients have a maximum stay of 45 days, after which they are sent home or referred elsewhere.

Hospital has training programs--doctors in medicine, obstetrics, GYN, pediatrics and dentistry. Pediatrics is also UConn training center--they are

affiliated with UConn strongly. Burgdorf is now Mount Sinai, and Hospital has UConn residency in the Pediatrics Dept.

Mr. Ralph Gould, Director of Development and Public Affairs, thinks that Mount Sinai has the best in the East re Radiology--because hospital has things like the only Mammography (detection of breast cancer).

HISTORY OF HARTFORD HOSPITAL

An explosion in a local manufacturing firm led to the establishment of Hartford Hospital in 1854. (No facilities existed in the city at that time to care for the victims.) Hartford Hospital is a privately owned, not-for-profit, general hospital dedicated to providing the best possible care to patients.

The hospital first opened its doors in the former "home for the sick" and in 1860 moved into its own building not far from the hospital's present location. In its first year, the hospital cared for 20 patients. Now, there are some 40,000 admissions each year and some 140,000 visits recorded in the outpatient and emergency departments.

As one of the largest community hospitals in the country, Hartford Hospital has over 900 beds, over 3,900 full- and part-time employees plus 850 volunteers. South Building, opened in 1942, houses maternity and gynecological patients as well as some outpatient services. High Building opened in 1948 houses the bulk of inpatients. Intensive care units are located in medicine, surgery, neurosurgery, pediatrics and cardiology. The Continuing Care Unit, completed in 1966, houses physical medicine/rehabilitation services and patients, psychiatric services, kidney dialysis services as well as the medical library. The Bliss Wing, completed in 1972, is attached to high building and contains two patient floors, laboratory, x-ray and operating room facilities, cafeteria and office areas. Three of the wing's nine floors have been purposely left unfinished for future expansion as needed. Brownstone Building, a six-story building in continuous operation since 1923, now houses nearly all the hospital's outpatient services. The latter part of 1975 will see the completion and opening of the Heublein Radiation Therapy-Oncology Center, a modern cancer treatment facility which will serve patients from throughout the region.

Formal educational programs are conducted in medicine at the undergraduate and graduate levels, in nursing, and in the allied health professions. There are some 715 students in training with others who come for clinical affiliations throughout the year from various schools. This reflects the conviction that research and education are inseparable from the hospital's primary role of patient care.

Hartford Hospital is a founding member of the Capital Area Health Consortium, a new and special effort to combine the resources of eight hospitals in the Greater Hartford area. Formed to collectively maintain and improve health care quality in this region and develop a health care system designed to meet its health needs, the consortium comprises some 30% of Connecticut's total hospital beds and provides services and facilities to an estimated 1.5 million people.

SAINT FRANCIS HOSPITAL

Saint Francis Hospital, established in 1897, is a general, community, non-profit hospital, chartered by the State of Connecticut and by the Roman Catholic Archdiocese of Hartford.

It is fully and continuously accredited by the Joint Commission on the Accreditation of Hospitals, the nation's top evaluator of hospitals and of health care delivery by hospitals.

It is a teaching hospital, affiliated with the University of Connecticut School of Medicine and University of Connecticut School of Dental Medicine.

Saint Francis has a bed complement of 650. It offers the full range of medicine, surgical, obstetrical, gynecological and pediatric services and has extensive sub-specialty services.

It has a highly developed Ambulatory Care Department (Emergency Room and 22 clinics), including an Emergency Auxiliary Unit which provides diagnosis and treatment for walk-in patients who are not true emergencies. There is also a Pediatric Emergency Auxiliary Unit.

Within the Department of Ambulatory Care, there are, in addition to medical and nursing personnel, such individuals as community health workers and bi-lingual personnel who are able to help clinic patients with various problems.

Saint Francis Hospital is a member of the Capital Area Health Consortium and is a charter member of CHAP (Combined Hospitals Alcohol Program).

Saint Francis Hospital is an active member of the Asylum Hill Group, a neighborhood improvement organization.

Its charter granted by the State of Connecticut in 1897, states that Saint Francis Hospital is "a hospital in the City of Hartford, into which sick or injured persons may be admitted and cared for, and receive medical and

surgical aid and treatment, without regard to the race, nationality, creed or belief of such persons."

Saint Francis Hospital has lived up to this charter statement.

Saint Francis Hospital conducts the only three-year diploma program School of Nursing in the area. Now in its 75th year, The School has over 4,000 graduates who practice their profession in hospitals, in industry, in schools, in private duty, in the armed forces all over the world.

Saint Francis Hospital conducts a number of educational programs for those preparing for paramedical professions. A booklet describing the career education possibilities at Saint Francis Hospital is available upon request.

Also available upon request is the hospital's most recent annual report, which lists the active medical staff, statistics of the past year, the executive director's report, and other pertinent information.

VETERANS ADMINISTRATION HOSPITAL
Newington, Connecticut

The mission of the VA Hospital, Newington, Connecticut is fivefold:

1. To provide the highest quality medical care to those eligible veterans, and others, for which such care is authorized by law.
2. To develop appropriate continuing education and training programs for all levels of employees to improve knowledge and skills, as well as to provide an appropriate climate for quality clinical experience for affiliating students.
3. To encourage and support research endeavors in order to increase the fund of scientific knowledge and to aid in recruitment and retention of a high caliber staff.
4. To remain an integral part of the community health care delivery system and whenever possible to eliminate duplication of resources through sharing agreements.
5. To accomplish all of the foregoing through judicious use of resources.

A BRIEF HISTORY

The current site of the Veterans Administration Hospital was selected in January, 1929. The first spadeful of earth was dug on February 28, 1930. The hospital was dedicated July 12, 1931. The initial cost was $$1,000,000 for a hospital of 250 beds.

The first patient was admitted on May 14, 1931. During the hospital's history, it has participated in the training of psychologists, social workers, pharmacists and administrative assistants, to name a few.

In July 1969, the hospital began an affiliation with the University of Connecticut Health Center and is considered as a university caliber hospital. Over the years, residency training of physicians has been performed with the

Hartford Hospital. This relationship also continues.

Currently, the hospital is operating 183 beds, a large outpatient department, a mental hygiene clinic and a day care center. Approximately 512 employees operate this complex at an annual payroll in excess of $7,000,000.

Thanks to updated health care facilities and modern medical and surgical practices and procedures, the average stay for patients has decreased in recent years. Ten years ago, a patient stayed an average of 29 days in this hospital. This length of stay has decreased through the years as follows: 5 years ago, 25 days; 3 years ago, 23 days; 1 year ago, 17 days. Today, the average stay for a patient is 14-1/2 days spent in the hospital from date of admission to date of discharge.

SPECIAL MEDICAL PROGRAMS

For many years, the Newington VA Hospital has been responsible for a number of special medical programs including:

1. Surgical Intensive Care Unit
2. Medical Intensive Care Unit
3. Coronary Care Unit
4. Renal Dialysis (Sub-Unit)
5. Nuclear Medicine
6. Prosthetic Brace Shop
7. Day Care Center
8. Mental Hygiene Clinic
9. Respiratory Care/Pulmonary Function Lab

TRAINING AFFILIATIONS

Newington's training affiliations with the University of Connecticut have been expanding for the past several years. At present, the following affiliations are in effect:

Interns	School of Medicine
Surgical Residents	School of Medicine
Medical Residents	School of Medicine
Pathology Residents	School of Medicine
Clinical Clerks	School of Medicine
Clinical Clerks	School of Dentistry
Nurses	School of Nursing

Social Workers	School of Social Work
Physical Therapists	School of Allied Health Professions
Psychologists	University of Connecticut

FUTURE PLANS

Newington's plans for future changes include:

1. Expanded Radiology Service Facilities
2. New Dental Clinic
3. Special Diagnostic and Treatment Unit
4. Dermatology Unit
5. Complete Expansion and Reorganization of Ambulatory Care Services
6. New ENT Clinic
7. New Operating Room
8. New Fire Alarm System
9. New Boiler Plant
10. Improved Animal Research Facilities
11. Hospital Based Home Care Unit
12. Dialysis Unit

NEW EXPANDED MEDICAL UNITS

Medical Intensive Care Unit

This unit contains eight beds. This area is furnished and staffed to care for the most critically ill patients. All beds are equipped with cardiac and respiratory monitors that relay information directly to the Nurses' Station. The unit is designed so that all patients are in view of the nursing staff at all times.

Ward 4

Ward 4 is a General Medical Ward adjacent to the Medical Intensive Care Unit. It provides care for 38 patients with private, semi-private and ward accommodations. Each bed is equipped with wall-mounted oxygen and suction equipment.

Surgical Intensive Care Unit

This unit contains five beds. Like the Medical Intensive Care Unit, this

unit is equipped with the latest life-saving equipment. The staff is trained to handle surgical and medical emergencies as well as providing 24-hour care of the surgical patient requiring specialized attention.

APPENDIX H

APPENDIX H

Health Careers Day Participants

Physical and Occupational Therapy	Mrs. Inez Faniel, R.P.T.	Institute of Living
Pharmacy	Miss Suzanne Evans, student	UConn School of Pharmacy
	Mr. Alfred Ford, Reg. Pharm.	Ford-James Pharmacy
	Mr. Horace James	Ford-James Pharmacy
Speech Therapy	Miss Frances Jones, Sph.T.	Hartford School System
Dietary/Nutrition	Mrs. E. Marshall, Chief Diet.	Mt. Sinai Hospital
	Mrs. E. Walters, 4H Agent	UConn, Extension Service
Nursing	Mrs. Lloyd McDuffie, O.R.Supv.	UConn McCook Hospital
	Mrs. Sally Watson, R.N.	Mt. Sinai Hospital
	Mrs. Alva Trimble, R.N.	Mt. Sinai Hospital
	Mrs. Gwen Robinson, R.N., P.N.A.	St. Francis Hospital
	Mrs. Alice Wilson, R.N.	Women's League Day Care
Public Health	Mrs. Jeanette Barton, R.N.	Hartford Health Dept.
	Mr. D. Shopshire, Public Health Advisor, Epidemiologist	Hartford Health Dept.
Family Planning	Mrs. Sandra Jibbrell, Consultant	Hartford Health Dept.
Radiology	Mrs. Dorothy McConnors, Instr.	St. Francis Hospital
Consumer Protection	Mr. Thomas Wilson, Deputy Comm.	State of Conn.
	Mr. Radame Kortfight, cons.	State of Conn.
Education	Mrs. Joanne Lewis, counselor	Manchester Community
	Mr. William Edmunds, counselor	Hartford Community
Community Health Aides	Mrs. Jacqui Anderson, Dir. Com. Aides	Hartford Hospital
Horticulture	Mr. Kart Robinson, Horticulturist	UConn
Medical - Secretarial	Mrs. Mary Staubs, Sec., Med.	Dept. of Psych. UConn McCook
Social Service - Medical	Miss Betty Lawton, Soc. Worker	Adolescent Drug, UConn McCook
Laboratory	Dr. William Harris, Director, Lab oratory	Hill Health Center, New Haven
	Dr. Sherwood Lewis, Cl. Chemist	St. Francis Hospital
	Mrs. Mary Woodard, Chief Tech., Special Chemist	St. Francis Hospital

	Mrs. Irma Ingraham, Chief Lab. Tech.	Mt. Sinai Hospital
	Mr. Horace Kenny, Senior Microbiol.	Hartford Hospital
Community Medicine	Dr. Russel Martin	Health Planning Council
	Mr. Charles Grey	Health Planning Council
Research	Mr. Charles Benson, Ophthalmology Research	Veterans Adm. Hospital
	Mr. Kenneth Taylor, biochemistry	St. Francis Hospital
Dentistry	Mrs. Jerri Flood, dent.assistant	UConn McCook Hospital
	Mr. Joseph Williams, dent. student	UConn Dental School
Medicine	Dr. Gwendolyn Dukes, psychiatric resident	UConn McCook Hospital
	Mr. David Dowby, student	UConn Medical School
	Mr. Henry Yarboro, student	UConn Medical School
	Mr. Glen Howard, student	UConn McCook Hospital

FINAL REPORT

FOR

TOWARDS AN ALLIED HEALTH CAREER TODAY
(Operation TACT)

Prepared by

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Carol Carter, Ed.D.
Patricia Madison, M.Ed.
Alexander J. Plante, Ph.D.

School of Allied Health
The University of Connecticut

June, 1975

Contract No. NO1-AH-24242

FINAL REPORT
FOR
TOWARDS AN ALLIED HEALTH CAREER TODAY
(OPERATION TACT)

Introduction

This final report for Operation TACT is presented to the Division of Health Professions (DAHP), Bureau of Health Manpower, Health Resources Administration, as a companion document to the evaluation analysis developed for the program and also presented to NIH in June of 1975. It is felt that needless repetition of information can be avoided if the final evaluation of Operation TACT can be accepted as an attachment to this document.

Methodology Employed

From the beginning of this project, a consortium approach was utilized as the best means of guaranteeing success in the implementation of Operation TACT. The use of resources from the major agencies and institutions concerned with the development of manpower for allied health occupations in the Hartford area was considered to be the most hopeful direction to pursue and proved to be a decision which accounted for much of the success achieved by the project. The consortium created for Operation TACT was made up of the following agencies and institutions:

1. Greater Hartford Community College
2. Hartford School System
3. Manchester Community College
4. University of Connecticut
5. Urban League of Greater Hartford

The details are given in the attached evaluation report (see pages 3 through 6) which describe the ways members of the Operation TACT consortium were used.

Itemization of Paid Personnel

The following is a listing of the paid personnel of Operation TACT as well as their role and functions:

PROJECT TACT

Person	Title	Period of Service	% of Time
Dr. Frederick G. Adams	Project Director	1972-75	100%

Function: To be responsible for total conduct of Project TACT in the areas of planning, direction, supervision, and evaluation.

To formalize and develop a consortium of educational institutions and community organizations in the Greater Hartford Areas.

To develop allied health curricula for high schools, vocational-technical schools, community colleges and university education programs which are interrelated.

To provide administrative and supervisory leadership to the consortium.

To employ qualified staff to implement the specific objectives of the program.

To coordinate and supervise the activities of the program staff in the actualization of the work objectives.

To provide progress reports of work and accomplishments on a quarterly and final report basis consistent with contract requirements.

Patricia A. Madison	Project Director	1974-75	100%

Function: See above.

	Asst. Project Director	1972-74	100%

To develop and implement a program to provide for an improved allied health career counseling.

To catalog information on field trips appropriate for students in allied health occupations and professions.

To develop and implement a counseling service network which will include community action groups.

To develop and implement allied health curricula which commence at the secondary school level and continue through the University level.

To promote understanding at all educational levels and enhance the implementation of Operation TACT through planning and conduct of orientation meetings and workshops.

To prepare quarterly reports indicating progress of work and accomplishments.

To assume day-to-day administrative and supervisory responsibility for the total project.

Eleanor Schmeh	Curriculum Specialist	1972-73	100%
Susan Miller	" "	5-73/9-73	100%
		9-73/6-74	20%
Allen Fisher	" "	1973-74	100%
		10-74/12-74	20%
Carol Carter (Brooks)	" "	10-74/6-75	100%

Function: To assess the current curriculum for Grades 7 - 12.

To redesign and include material as dictated by the Contract for Operation TACT.

To develop a curriculum that would promote the introduction of advanced science content and clinical experiences for students Grades 7 - 12.

Thelma Tauris	Counseling Specialist	10-72/8-73	100%
Robert Guyon	" "	7-73/6-74	100%
		6-74/8-74	30%
		8-74/9-74	20%
		9-74/6-75	50%

Function: To identify resources both human, physical, and material, et al, for teachers, counselors, students, etc., using the allied health curriculum.

To identify prospective field trips for students to enhance the use of the allied health curriculum.

To provide workshops, seminars, sessions with teachers utilizing the allied health curriculum.

To coordinate educational placement: a) to assist in the identification of students using the allied health curriculum who could benefit from firsthand experience in a health care situation; b) to identify prospective placement sites; c) to coordinate activities of students on placement sites; d) to identify supervisors in the clinical sites and to work with them in facilitating the experiences of the students in the clinical situation.

Cynthia Adams	See below	4-25-74/6-30-74	100%
Joseph Prewitt	" "	9-10-73/7-16-74	100%
Chas. Woodward	" "	6-22-72/3-13-73	25%
Tracy Smith	" "	10-1-73/6-21-75	20%

Function: To assist the Counseling Specialist in coordination of Clinical Education and Placement.

Lionel Porter	Research Assistant	12-1-72/6-21-73	100%
		6-22-72/12-1-73	50%
Peter Dublin	" "	3-1-73/6-21-73	100%
*Marjorie Seiferheld	" "	6-5-74/8-16-74	*
**Laverne Gordon	" "	3-1-74/4-12-74	**

* - Release time to SAHP for Accounting services provided.
** - Release time to SAHP for Consulting rendered.

Function: To identify pertinent data related to the allied health professions;

To organize data regarding the lattice framework of the allied health professions.

Evelyn Millane	Steno III	1-3-73/6-7-74	100%
Gladys Kielb	" "	6-22-73/1-7-74	100%
Cecilia M. Heck	" "	3-15-74/6-21-75	100%

Function: To take dictation and transcribe.

To take minutes at Executive Board Meetings and weekly Operation TACT staff meetings and transcribe, distributing minutes to designated professional staff and members of the Executive Board.

To assist Project Director by performing secretarial and minor duties.

To notify appropriate professional staff of meetings and members of the Executive Board. Reminds Project Director of meetings and appointments.

To maintain files of correspondence, minutes of meetings, curricula and related materials. Opens and sorts mail.

To train, supervise and coordinate clerical workers.

To perform a variety of related clerical duties.

To type curricula for Grades 7 - 12 which is sent to publisher for publication.

Joyce Keaton	Clerk Typist	9-1-73/4-30-74	(20 hours weekly)
Mary Frazier	" "	1-1-74/6-21-74	50%
Laura Thornton	" "	8-12-74/6-21-75	(20 hours weekly)

Function: Ms. Thornton:

To coordinate film distribution.

To coordinate field trip dates.

To keep a film library for resource libraries.

Al Weston	Consultant	6-22-72/9-1-72	100%
Denise Drumm	"	6-22-72/9-1-72	100%
Alexander Plante	"	4-28-75/6-13-75	100%

Function: To assist in the collection, organization, reporting, and collating of any material pertinent to the development of curriculum materials, organization of field trips, and evaluation.

Nate Thomas	Resource Person	3-20 and 3-21-75	100%

Function: To take films on Clinical Site, Veterans Administration Hospital, Newington, Connecticut.

Hank Mallory	Consultant	4-15-75	100%

Function: To be a Consultant at the Allied Health Career Day, April 15, 1975 at Fox Middle School, Hartford, Connecticut.

Itemization of Volunteer Personnel Services

In addition to the paid staff of Operation TACT, the following persons served the project on a volunteer or non-paid basis:

1. Executive Committee

Frederick G. Adams, D.D.S., M.P.H.
Chairman
Dean of School of Allied Health Professions
The University of Connecticut

Arthur C. Banks, Ph.D.
President, Greater Hartford Community College

Mr. William Brown
Executive Director, Greater Hartford Urban League

Robert H. Fenn, Ph.D.
Dean of Faculty, Manchester Community College

Mr. John LeConche
Supervisor of Career Education, Hartford Public Schools

Frederick W. Lowe, Jr., Ph.D.
President, Manchester Community College

Mrs. Juanita Payne
Coordinator of Health and Welfare
Greater Hartford Urban League

Mrs. Dorothy Payne
Community Representative

Mrs. Julia Ramos-McKay
Community Representative

Claire Reinhardt, Ph.D.
Consultant, Health Occupations Programs
State Department of Education

Mr. Peter Roach
Administrative Assistant to the Superintendent
Hartford Public Schools

2. Advisory Committee

The Advisory Committee consisted of thirty-six (36) individuals. Their names and assignments are shown by Appendices E and F of the attached evaluation.

3. University Personnel

The proposal for Operation TACT as written indicated that the School of Allied Health faculty and staff of The University of Connecticut would provide assistance to Operation TACT whenever necessary. Specific individuals involved were:

Joseph Smey	The University of Connecticut, SAHP staff
Joyce Mooty	" "
Kay Schoeplein	" "
Polly Fitz	" "

4. College Personnel

Community Colleges had associative programs in Allied Health which provided another alternative for students. Staff from Greater Hartford Community College and Manchester Community College participated as resource personnel or on committees; i.e., Dr. Arthur C. Banks on Executive Committee.

5. Board of Education Personnel - City of Hartford

Peter Roach	Administrative Assistant to the Superintendent
John LeConche	Supervisor of Career Education

Hartford Public School Personnel:

1. Quirk Middle School

Val Brown, Teacher
Art Corbeil, Teacher

2. Fox Middle School

David Lawrence, Chairman, Science Department
Linda Thomas, Guidance Counselor
James Parham, Teacher
John Willmington, Teacher
Robert Grant, Teacher
Helen Sullivan, Teacher
Peter Sussman, Teacher
Antres Buford, Teacher
Annie Menesci, Teacher
Robert Streffer, Teacher

3. Hartford Public High

Agatha Sheppard, Chairman, Science Department
Charlene Page, Teacher
Barbara Haydasz, Teacher
Al Phillips, Teacher
Harry Spring, Teacher

4. Weaver Public High

David Lawrence, Chairman, Science Department
Daniel Seals, Teacher
Thomas Ryan, Teacher
Joseph DeGrandi, Teacher
Irma Powell, Teacher
Gilbert Stuart, Teacher
Richard Heinz, Teacher

6. Hospital Personnel

1. Veterans Administration Hospital, Newington, Connecticut

Mr. Jon Matthews, Director of Personnel (An affiliate of SAHP)

A summer program in 1974 and the one-month project involved a number of VA personnel.

Curriculum of Operation TACT

Five (5) copies of the curriculum guides developed for Operation TACT have been forwarded to the National Institute of Health as a part of the Final Evaluation Report.

Agreements Negotiated

There were no formal contractual agreements made between The University of Connecticut, School of Allied Health Professions, and participating educational institutions and clinical affiliates.

Field Trips

A complete listing and description of the field trips used by Operation TACT for students in Grades 7 through 12 is provided by Appendix C of the attached Final Evaluation Report.

Description of Involvement with State and Local Agencies

Because the implementation methodology employed by Operation TACT used a consortium structure, the involvement of the "broad community" was relatively easy to accomplish. Once a relationship was established with the Hartford School System and an agreement was reached to use their schools to implement the Operation TACT instructional program, a variety of resource persons and institutions became available to the project. (See the previous section entitled "Methodology Employed" as well as Appendices E and F of the attached evaluation report.)

With the two community colleges serving the Greater Hartford area and the State University as members of the consortium, the full potential of higher education in Connecticut became available. Also, it became obvious that a major organization devoted to the service of minority groups was needed so that this type of involvement and resource could become a part of the program. This became a reality when the Greater Hartford Urban League joined the Operation TACT consortium.

Through prior agreements, cooperation of the Connecticut State Department of Education was secured and appropriate staff members of this agency were assigned to the executive and advisory committees. Further, this cooperative arrangement with the State Department of Education resulted in the securing of funds to provide a summer training program for selected staff of the Hartford School System.

In terms of problems presented by the consortium approach, it needs to be made clear that the usual issues related to volunteer services had to be dealt with. Nevertheless, the consortium approach contributed greatly to Operation TACT and was a major factor in its success.

Next Steps for Operation TACT

To continue Operation TACT, it is essential that a commitment be made by the Hartford School System and the Connecticut State Department of Education to establish this type of program. It will require that the State provide vocational funds to stimulate the institutionalization of the program in the Hartford School System. Also, the Hartford School System must rearrange its present resources which are needed to maintain the instructional and counselling services required for an Operation TACT type of program.

The essential steps needed to be taken in order to continue the Operation TACT program in the Hartford School System are as follows:

Step I--To secure a decision from the Hartford Board of Education which makes it clear that they wish to continue Operation TACT and will commit some of their present resources to the program. Dr. John LeConche should be the person to steer this decision through the Hartford School System.

Step II--To secure a grant from the State Department of Education to provide funds for the administration and training parts of the program. These funds might be appropriated through monies available in the State to establish vocational programs for disadvantaged persons. The contract person in the State Department of Education would be Dr. Claire Reinhardt as well as the Commissioner of Education.

Step III--To reestablish the consortium formed during the past two years to implement and operate the program.

Step IV--To institute the program on an operational basis beginning in the Fall of 1976. This would involve a cooperative relationship with the School of Allied Health of the University of Connecticut.

INSTITUTIONAL EFFECTS OF OPERATION T A C T

In the Final Evaluation Report some of the effects of Operation TACT are noted. However, these effects are restricted by the limitations of 1) funding, 2) institutional involvement, 3) programmatic commitments to the concepts of TACT. On a microscopic scale some of these effects have been adopted by The University of Connecticut School of Allied Health Professions and the Hartford Public Schools without the total support systems to pursue the total implementation. As part of the Scope of Work one aspect was to outline ways in which the program (Operation TACT) could ultimately sustain itself as a complete educational entity; noting the aforementioned constraints the following outline connotes ways in which TACT has had positive "spin off" effects for the cooperating institutions of higher education and the Hartford Public Schools:

1. During the summer (June, 1975 through August, 1975) thirty (30) youngsters are being paid by the Comprehensive Manpower in a clinical training at the Newington VA under the auspices of Operation TACT.

This experience was a direct result of the continued interest of young people in the allied health professions which was generated by courses which were introduced through Operation TACT. In order for the students to be involved in the clinical training at the VA, they had to meet the following criteria: 1) be enrolled in September, 1975 for one of the courses being taught utilizing the TACT curriculum; 2) have completed a course which utilized the TACT curricula; and 3) having been a student in the 12th grade clinical class which was offered by the Hartford Public Schools. It should be noted that these students were afforded this educational opportunity because the relationship between The University of Connecticut School of Allied Health Professions and the Newington

VA requested a continuation of the relationship between the Schools and its institution.

2. Due to the discontinuation of funds The University of Connecticut School of Allied Health Professions funds are being solicited from the Veterans Administration in Washington, D.C., to support an expanded clinical situation for students in the Hartford Public Schools. Hopefully, the grant will accomplish the following goals:

   a) To establish workshops for the teachers who are utilizing the TACT curricula in order that they may write performance objectives as the evaluative criteria, and these criteria will be written in consort with the curricula which has already been written.

Again, this kind of involvement on the part of these institutions suggests that the goals of TACT were such that they should not conclude with the termination of funds afforded by this grant.

It is recommended that the following steps be taken into consideration:

Step I: Secure a decision from the cooperating Board of Education so that a definite commitment is made regarding the utilization of resources within the system to support the program.

Step II: Secure the cooperation from the School of Allied Health Professions, at a university, and other clinical institutions with definite ways in which each agency will be involved and identify who will be the liaison person(s) for that agency.

Step III: Secure a grant from a funding agent (State Department of Education or Federal) to aid in the implementation of the program. However, if the Board of Education does not desire to maintain the program on external funds, it could be supported by the reallocation of funds earmarked for vocational education.

While a precise time schedule is presently premature in determining what is applicable for other communities, the staff of Operation TACT can project that in order to implement a similar program, it could take from six months to a year. The identification of resources, clinical facilities and definitions of institutional involvement are all variables which must be considered.

The curriculum has already been developed, but there may be certain aspects of it which would need to be redesigned, so that it would be commensurate with educational goals of a particular community. Various workshops should be established so that parents, counselors, teachers and students could become acquainted with the program. Therefore, adequate time should be allowed for this activity.

Cost factors will vary according to the desire of communities to implement this kind of program. However, the tentative budgetary submission is predicated on the assumption that: (1) the curriculum can be utilized, with or without modifications; and (2) the program will have some seblance of autonomy.

Staff	
Director	$18,000.
Counseling Coordinator	16,500.
Secretary	9,000.
Consultants	1,500.
Travel	3,000.
Supplies	5,000.
*Teacher Compensation	5,000.
TOTAL	$58,000.

*Depends on the pay schedules of systems